

11.09.09

Comment 1

thoughtful speculations about all the many differences that separated you from this grandmother

Comment 2

You felt a kind of sympathetic grief, yes? You didn't grieve for a grandmother you didn't understand; but you did grieve for the pain of the mother you loved deeply.

Comment 3

Perhaps this empty feelings hints at the role your grandmother played in your life?

Comment 4

This awareness mirrors the fact that grief evolves and changes, but does not disappear. People do not "move on."

Comment 5

have been a sometime student of Buddhism for many years, and I still wrestle with the concept of non-attachment when it comes to people. Much easier with things! But in my primitive western mind, I think the idea may be to maintain love and caring, while retaining the capacity to let go. How to do this? I'm still working at it!

Comment 6

As you point out, there are many forms of grief called forth by the different relationships we have with others. Your grandmother's death evokes a sense of emptiness. Did you ever hear the phrase "emptiness is fullness"? Perhaps this is exactly how you should be mourning this loss.

Comment 7

May it be many, many years from now! It is obvious you love her very much.

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01.12.13

Comment 1

We think of grief as an emotion, but in fact it is also a physical sensation.

Comment 2

This one brief image conveys so well your affection for your brother.

Comment 3

We don't want these terrible things to be real, and our brains do their best to make them "not real." It's something to remember when we facilely say a patient or family member is "in denial" with the slightly pejorative connotation that they just "can't take reality." When our reality turns horrible, most of us reject it initially.

Comment 4

This is a very common fear among family members – children worry they will forget what their mother looked like, wives lament they can no longer conjure up their husband's smell.

Comment 5

It is very hard indeed to learn this lesson in this terrible way, but it's a lesson to cherish, perhaps the most important lesson we can learn about our fleeting and precious lives.

#### Comment 6

This is a wonderful awareness. It concretizes beautifully in simple acts how we can treat life as precious.

#### Comment 7

Yes, this is just true. I wish it were different, but it is part of how life works.

#### Comment 8

This is quite beautiful, and Erum, I see you adding sentences filled with compassion, caring, and love every day to your book.

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11.08.09

#### Comment 1

You are so right that there is no "one" grief; that each loss evokes a different kind of grief.

#### Comment 2

You capture very well the stigma that still attaches sometimes to cancer – not only is it deadly, but "objectionable." What a good observation.

#### Comment 3

Such a vivid and accurate way of describing the impact of divorce . The safe, predictable, just world has vanished – and it can never be completely restored.

#### Comment 4

Yes, you had to struggle to form a new understanding of the world that could accommodate the devastating events that had occurred.

#### Comment 5

To me, this does not seem foolish at all, but makes perfect sense. This was, in a very big way, your introduction to grief, the collapse of the world as you knew it.

#### Comment 6

This insight is profound, in my view. When someone dies, sometimes we grieve because we know they yearned for more life (although very often as in Dr. Potts case, the patient is ready to go); but always we grieve for the way we were known and cherished by that person, which can never be replicated, and is now lost forever.

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#### Comment 1

Oh, those wonderful defense mechanisms!!! They work for a while, but sometimes one of these actually slips through and we feel the pain of loss. I'm curious to know how you dealt with those feelings - really for the first time? Are you now more determined than ever to keep those defense mechanisms strong? I can't blame you if you do. Or, did your feelings of loss with this gentleman actually produce a less painful result than you expected? That maybe it's ok to feel this and to get close to patients - maybe not all. I'd love to hear more about your thoughts on this. Thanks so much for sharing.

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#### Comment 1

I only wanted to add my thanks and encouragement to Dr. R's. You are in the belly of the snake - in the throes of grief, both your own and your father's. He is mourning and afraid and so are you. I deeply respect your efforts to console your father, even as you are dealing with the loss of the father you knew. I am sure he needs your love and support, even while he is still struggling with how to accept it. I would only encourage you, in the midst of being strong for your dad, and I'm sure other family members, that you find a way to acknowledge your own anger, confusion, helplessness and fear. It is evident what a good son you are; yet as you realize, illness hurts not only the patient, but ripples out to distress all those around him or her. Finally, it is a tribute to you that, in the midst of such grave personal challenges, you find the energy and compassion to think about the suffering of the patients and families for whom you're caring. May you and your family find the grace and grit to navigate this journey. Best, Dr. Shapiro

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11.04.09

Comment 1

This is such a poignant observation. Our mind recognizes the inevitable, but our hearts – and our imagination – just can't encompass it.

Comment 2

You know, it's interesting how we expect certain situations to trigger certain emotional reactions, and when they don't, we worry if we are responding normally.

Comment 3

In the case of your great-grandma's passing, it seems you were at peace and could accept her loss. It was both natural and inevitable, and you could relish her long and rich life.

Comment 4

Yes, we all have an idea about how we would like to behave in the face of loss or other challenges. Until we actually experience the event, we don't know who will show up.

Comment 5

I too hope you will always be "proud" of how you respond in the face of suffering or loss. But I wonder... should you always expect yourself to be so accepting so quickly? As you pointed out, certain aspects of your great-grandma's passing – the foreknowledge, her longevity, her good life – helped you to come to terms with her loss. Other losses may be more painful and difficult, and that may be perfectly okay as well.

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11.07.09

Comment 1

No one likes this feeling; but I think for physicians it is particularly distressing, because of your commitment to helping make people's lives better. It is very hard when there is "nothing" you can do to cure or improve.

Comment 2

This is such a profound observation – the science after awhile becomes "simple," but the tragedies in people's lives are never simple.

Comment 3

This is such an important insight, Chris, and I believe addresses that issue of not being able to “do” anything. As you astutely realize, even when the pt is beyond cure or care, how this information is presented to the family, and how their grief is responded to by the physician, matters immensely.

#### Comment 4

It is an understandable oversight, but as you realize, one that can unintentionally inflict additional suffering on family members

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#### Comment 1

I so appreciate you sharing about the loss of your dear friend. I remember you telling the story during Healer's Art - the way you handled the loss was very normal. Feeling sad, maybe even a bit angry. Then working through missing him, remembering the good things about him and maybe going back and forth a bit. Ultimately coming to a place of peace knowing that his legacy will live on through his memory and through what you've learned through his life...and his death. As you said, he died doing what his life was about - helping others in time of need. What an amazing legacy.

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#### Comment 1

This is wonderful. You captured a moment, a feeling, a world within a brief encounter. You learned something valuable...that you can disengage. But, is it healthy? Probably more than we think. Although, while alive, my hope is that we were able to empathize, to connect and to relate to the patient. At his death, what do we do? It's a new road...what is our role? I'm not sure what kind of relationship you had to this patient before he passed, but that will make all the difference in terms of how you feel the loss, I suppose. No matter what, the grieving process is different in each situation, with each person.

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#### Comment 1

Thanks for sharing Mr. McGary's story also. It must have been devastating for you. He sounds like such a dedicated, wonderful man. How senseless his loss was...but how amazing his life was. He touched so many people. Every one of the people he touched can take a little bit of his generosity and kindness with them through life and give it away as he so selflessly did. I have experienced similar sudden and unimaginable loss, so I know how you must have felt. It isn't fair and the world is at a loss without Mr. McGary. But, through his legacy, all of those (and now I'm included!! :-)) whom he touched can carry on in his place. Thanks for opening up to us about this loss of yours and thanks for taking the time on your busy trip. We wish you all the best on your interviews and will be thinking great thoughts and sending them your way!!!!

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#### Comment 1

What a brilliant essay. It captured and transmitted your pain and despair, the process of grieving your loss so amazingly well. Loss is loss. And everytime we have a loss, we have to allow the grieving process to unfold. It involves so many different feelings, painful feelings, anger, sadness, loneliness, despair - but ultimately as we let the process unfold - healing occurs. We

will definitely keep this confidential - no worries. Thanks for honoring us by trusting us with this very personal story.

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Comment 1

Thanks for sharing your experience. One experiences loss and greives that loss so differently as a youngster than as an adult. But, to lose a father at such a young age - the loss manifests in so many different ways over so many years. It really isn't fair. My brother died almost 30 years ago and left a 4 year old and 1 year old boy. It took an entire family of relatives to help raise those two with a minimal physical and financial sense of loss for all those years. But, what a hero your mother is - to raise 3 daughters on her own. I appreciate her so much through your words and your and your story. Thanks again for sharing this deeply personal experience.

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12.04.08

Comment 1

Were there other opportunities? Grieving usually continues and is often even harder when the ceremonies end. Were you able to spend time with your father, your grandmother, others who loved him?

Comment 2

Which was harder, accepting his death or accepting that you had not been there for the formal grieving process?

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12.04.08

Comment 1

I can't help but wonder, who is Dr. Stevens? Why did he elect to tell you about what he was experiencing?

Comment 2

Could you actually imagine being in this situation? A lot of people deny it might ever happen.

Comment 3

Was it truly nonchalance? Sometimes health care providers experience relief at no longer have to care for a very sick person, or may believe that it is good for this person to have been ultimately relieved of their suffering. The reaction may actually be positive, when they are pressed for explanation, thought it at face value it does sound horrible.

Comment 4

What a wonderful phrase, one that needs to be better incorporated into medical education.

Comment 5

I hope you will hold onto this belief and perhaps this paper as a constant reminder.

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12.04.08

Comment 1

Were you already in medical school? Do you think knowing more would have helped, if not him, at least you to feel better?

Comment 2

Should it ever feel easy? I can't help but worry that it might seem easy one day. Then I think we are really in trouble. Pain is certainly not something we look to feel, but I believe it can make us better health care providers.

Comment 3

Real empathy is of such great value.

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11.17.10

Comment 1

As you well know, this kind of delayed grief reaction often occurs. Perhaps we initially “feel nothing” because to feel something acknowledges the terrible reality of what has occurred.

Comment 2

I wonder if there was anything you learned in this experience that you think may help you navigate patients' deaths, or help you interact with family members

Comment 3

Yes, family can be so important at these times of loss.

Comment 4

It is pretty extraordinary that your grandfather did not pass away until after you'd been able to see him. You've probably seen this phenomenon in terminally ill patients as well, when they survive until an important anniversary or a much-anticipated event. The human spirit is extraordinary.

Comment 5

Thank you for your lovely essay about your grandfather. As in your case, the death of a grandparent is often the first real loss a person experiences. It is a very hard one because of the way it reverberates across the different generations. It is sometimes the first time children have seen their parents grief-stricken and helpless. It sounds like the fact that you were at least able to see your grandfather and communicate your good news made his passing a bit easier to bear. I hope so. I made a few comments as well in the body of the text. Thank you again for sharing

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11.11.09

Comment 1

Yes, each family has its own, often inexplicable way, to handle these things. I wonder if this was a painful way though for you to receive this news?

Comment 2

A great example of how our emotional – grief for Spunky – trumps our rational – I know it's time to let him go.

Comment 3

this is a great insight, and research actually shows it to be true for human beings as well. When we have a very loving uncomplicated relationship with someone, it is easier to mourn them.

Comment 4

And in his absence, the family has to find new ways of connecting, which is not always easy. So you are mourning not only his being gone, but also what he contributed to the way your family functioned.

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11.17.09

Comment 1

this is very honest of you. It is hard indeed to imagine that our parents, and those we love, will no longer be on this earth. And one day, neither will we!

Comment 2

What a lot of loss for such a young woman. Not seeing her own mother again must have been incredibly sad.

Comment 3

You know, up to a point, our awareness of the fragility and impermanence of life can be a good thing, in that it reminds us to appreciate and make time for those we love. There IS a point where we can cross over into useless anxiety, of course.

Comment 4

Yes, good insight, you are experiencing anticipatory grief, in which we attempt to prepare ourselves for something nothing can really prepare us for.

Comment 5

You and I reach the same conclusion – but it's a pretty nice "task" when you think about it :-). I hope your parents live very long, full, and happy lives!

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Comment 1

I was so incredibly touched by your note and essay. I am always struck by how much of who we are remains hidden, until we take the risk to share something of ourselves. I feel deeply honored that you entrusted us with this story.

What a painful, painful experience. And what a wonderful physician role model you had in your internist. Even at this remove, I am moved when I read about his "kneeling down" and lifting your face out of your hands. I think you are describing one of the greatest gifts a physician can give a patient (and family): when everyone else is swept away in terror, panic, and despair, the physician is there as a calm, courageous, steady, yet compassionate presence, offering hope if possible, but ready to face the worst if necessary WITH the suffering patient and family.

This line of yours brought me to tears: "...through grief and struggle arose a new hope and steel resolve..." For me it encapsulates all that is noble and beautiful in the human spirit, our capacity to rise like a phoenix from the ashes of our own pain to commit to life and to others.

I hope it is not too tangential for me to share a personal resonance with your story. When my father was 17, his own father died of a massive MI at age 36 (as his father had died at age 48). That event changed my father's (and family's) life forever (he had to drop out of college to support his family; one of his brothers converted from Judaism and became a Christian minister; and the third brother became a cardiologist). This loss of a grandfather I never knew nevertheless profoundly shaped my own life story, and propelled me as well toward a career in medicine (although not being as smart as you, I had to settle for being a shrink

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Comment 1

Thanks so much for sharing about your aunt. What a wonderful woman and even though she's gone, you have a heart full of great memories. I totally understand your feelings about funerals. Sometimes it's important to push through our disdain for them to support the family.

But, otherwise, attending can suck so much positive energy out of us - especially if it's not done as a celebration of one's life, but a mourning of one's death. We'll talk a bit more about the "normalcy" of grieving, which is so important, at the next session. Even though we may miss a funeral, allowing ourselves to go through the process of loss is important. Thanks again for opening yourself up regarding this very personal loss

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Comment 1

this is truly a brilliant insight. As you note, there is emotional safety in difference: to the extent that the dying patient is "not-you," no need to worry. You rightly observe that othering is a defense mechanism and protects you from the chaos of life. As such, it can serve a beneficial function. But I wonder if there is a downside to othering? By turning the dying into "other," do we run the risk of abandoning them? Can we learn something by having the courage to embrace our similarities - our shared vulnerability and mortality - with those who are suffering and dying? I hope we get a chance to discuss these issues in more detail in class.

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11.10.09

Comment 1

he wonderful phrase, "an interesting case"! I often wonder how "interesting" the patient finds his/her situation to be. (Of course, not that there isn't lots to learn from such a case, but it's easy to lose the patient's humanity with this as the dominant frame)

Comment 2

Of course, we talk of transference and countertransference in the highly technical language of psychiatry; but these are actually very human responses which, when modulated appropriately, are what enable us to connect and care about others, because we see little bits and pieces of our own lives in theirs.

Comment 3

Beautiful awareness of how your language and perceptions have become "medicalized" (again, this is not a bad thing, but it's important to realize how clinical language objectifies and distances us from the pt).

Comment 4

Your enthusiasm was well-placed. Indeed, you were being a good advocate for your pt!

Comment 5

I wonder if at this point at some level you realized that what you had to give this patient was no longer biomedicine (although you had done your absolute enthusiastic best on this front), but rather blessing and wishes of peace.

Comment 6



Obviously I cannot comment from a medical perspective, but I very much appreciate your raising this question. I am sure it is not cut-and-dried, and hindsight is 20/20, but it is reassuring to me to see a physician asking in essence just because we can, should we?

Comment 7

Some might say you were “too involved”; but if you asked the patient and his wife, I am pretty sure they would have said they were so grateful for your willingness to care.

Comment 8

It is easy to doubt and feel some guilt. Did you – the team – do the right thing? Did you put the patient through unnecessary suffering? Again, I’m not sure there are right answers, but being willing to reflect a bit on these questions I know will make you a better doctor.

Comment 9

This may well be true; at the same time, be careful about taking too much responsibility on your own still-student shoulders.

Comment 10

This comment also suggests that you – and the team – was influenced by the pt and his wife’s desire to pursue an aggressive course. So even if there were a different way to think about the pt, there may not have been time to get pt and family on board with this perspective.

Comment 11

Sumati, this is really a beautiful conclusion – not a resolution, because I see that you still have doubts (and that may well be appropriate). But sometimes we have to release our ability to control things, even though up to that point we’ve tried our best, and be willing to trust to a benevolent universe.

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12.08.08

Comment 1

How were you able to change like this? How did your family respond?

Comment 2

If it has helped you become the compassionate and caring doctor-to-be, I can’t help but think that your mother would be proud. I hope she had such wonderful physicians to support her when she needed them.

Comment 3

These are such important insights into yourself. Thank you for sharing them with us.

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02.03.09

Comment 1

I disagree. Losing a pet can be every bit as difficult. Though our relationships with our pets are different from those with humans, they can be just as intense and as important. Our pets are with us constantly, and seem to love us unconditionally. The loss of this connection can be devastating.

Comment 2

Your use of the passive voice here is revealing. Who made this decision? Did you feel like you didn’t have a voice in it, but should have?

Comment 3

This is making me sad, both for you and in remembering the loss of my cat.

Comment 4

How did your parents handle the cat's death? Did you see them express emotion, or did they hide their feelings from you?

Comment 5

Do you do this with patients too? Or have your experiences otherwise affected how you deal with dying patients?

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Comment 1

thank you for this essay. I was very moved by what you wrote. Your phrase re the patients who were coding, "... people hidden by the silence of intubation tubes..." resonated deeply for me. It is a kind of sanitation of the dying process. Your writing helped me to understand better just how much you all - and all doctors - have to do just trying to keep people alive. In many settings, such as SICU, you can't grieve because you are just working so darn hard. And obviously, that is the right priority. I hope however that, as you conclude, there are moments when you can "catch your breath," and let it all sink in. This is a bit of a stretch, but the last "pose" in yoga (fitting called the corpse pose!), is one where you lie completely still and allows your body, heart, and spirit to absorb and consolidate everything that has gone before. Those times of consolidation, although you appear to be "doing nothing," I've come to believe are crucial in helping us catch up and make sense of what's come before, so that we are prepared to go forward. Keep on the look-out for and cherish those moments of pause.

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02.03.09

Comment 1

This is true for so much of medicine, even illness that is not terminal.

Comment 2

It is fine to be angry. It helps keeps us human and engaged with our patients.

Comment 3

Our fear, projected onto the patient, often interferes with honesty and full disclosure. But studies show that most of the time patients/families really want to know what is going on.

Comment 4

Were you or any of the other physicians there too? Did you want to be?

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11.09.09

Comment 1

The death of an infant is tragic. All death represents loss, but the loss of a life that is not yet lived seems especially hard to bear.

Comment 2

Exactly. Death is difficult to assimilate, but in the case of the elderly, it is part of the normal cycle of life. An infant's death violates our expectations of normalcy and predictability.

Comment 3

This is it exactly. One might feel that all death is unfair – but a baby's death is completely unjust. As you say, it just feels wrong.

Comment 4

Aaron, that was a beautiful thing to do. The passage of this little life deserves this acknowledgment; and the suffering of his family – as well as the lesser, but real, suffering of his medical team – deserves acknowledgment too.

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Comment 1

Thanks so much for sharing about this experience. Clearly, your encounter with this gentleman hit very close to home with you. Often we are able to empathize with people so much better when we can easily see ourselves in the picture. You did that. The tough part is when it's a suffering patient that we have no obvious connection to - then we have to work a bit harder to empathize. I still remember several of these kinds of patients that I cared for during medical school and residency...mostly with fond memories now...but some still hurt a bit. It's a good thing to feel - it keeps me so grounded in what our vocation and life in general is all about. I'm so glad you were able to reflect on your experience in this way. Thanks again.

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Comment 1

I know Dr. R responded to you (and beautifully, I thought); but I just wanted to say that your essay affected me deeply. I hear how devastated you are by the death of your friend; and how the guilt of not being able to contact her prior to her surgery lingers. I do not mean in any way to rationalize your feelings, but it did strike me that your friend left you a "cryptic" message; didn't mention the surgery; and that she never wanted her family and friends to worry about her. Tragically, she was dealt a very cruel hand, and there was not a lot she could control in her life. She could determine to some extent how she presented her illness, and how she wanted people to respond to her situation. I understand that you would have felt a lot better if you'd been able to embrace her and talk with her and prepare to say goodbye. But it occurs to me that this might not have been what she wanted. I suspect, as Dr. Robitshek said, she knew you were a good friend indeed. We often focus on the small things we might have controlled, and ignore the really big thing that we can't control: the loss of a wonderful young woman. If I may, allow your grief to be pure, uncontaminated by self-blame. Thank you so much for entrusting us with this story.

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11.11.09

Comment 1

Yes, I think loss to a young child is processed very differently than as an adult

Comment 2

Many adults assume kids will respond in the same ways as they do to loss

Comment 3

It is a challenge for the dr – or medical student – but it is also a privilege to witness, and hopefully learn from, these deep emotions as people face their own mortality.

Comment 4

Billy, I'm impressed and moved by how deeply you resonated to and imagined the issues this man was struggling with.

Comment 5

Thank you for the honesty in acknowledging this. These are difficult interactions. I believe they can also be very meaningful and valuable – for both parties.

Comment 6

Hope is such an interesting concept. Of course, there is the hope most of us want – CURE! When that's not possible, you are quite right not to offer false hope. But perhaps there are other reasonable hopes? That the doctor will not abandon the patient in the dying process; that there may be ways to “pass on” a legacy; that pain will be controlled to the extent possible etc. I'd like to believe there is always something that can be promised.

Comment 7

We label this with the technical language of medicine, and often in a somewhat pejorative way: “Watch out for...” Yet it is precisely this feeling that allowed you connect and be open to your patient. Countertransference mechanisms need awareness, but are one basis for empathy toward strangers.

Comment 8

Billy, I deeply admire and respect your awareness of your own feelings. In the face of suffering and death, most of us feel both anger and helplessness. Perhaps the next question to ask is how can those feelings – or variants of them – best serve your patient? You were also aware of

personal feelings toward your own father. Again, this is a beautiful insight in a situation where you still have the opportunity to make different choices.

Comment 9

I do not want to be presumptuous, but being listened to and heard – as you so obviously did with this patient – is almost inevitably healing and comforting.

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11.09.09

Comment 1

thank you very much for entrusting us with the story of this devastating loss. Losing one's mother is very hard, and especially at 12, when you are just starting to try to differentiate as an adolescent.

Comment 2

These are such painful lessons to learn at this tender age. You describe them so poignantly, I can't help thinking of that little girl who was living through each stage.

Comment 3

It doesn't help at all when you are living through grief, but this fear of "never returning to normal" is so "normal" in and of itself. Of course, most of us do survive our grief, and to become "a normal person" again; only, as I'm sure you've discovered, it is a different normal.

Comment 4

We always like to think deterioration and death are controllable. If only, if only... Of course, sometimes different choices might have led to different outcomes. But we need to recognize that this is also a psychological mechanism for forcing the world back into a controllable, predictable, and therefore safer framework.

Comment 5

Absolutely! The Stoic Marcus Aurelius said that in certain situations, all we can control is our attitude. Acceptance I don't think necessarily just "happens." Sometimes it results only after a lot of work and determination. It is definitely an act of courage and commitment.

Comment 6

Yes, you describe the way grief evolves and changes very well. It never does "vanish," but at least to my mind, that is a good thing. If we are lucky – and courageous – our griefs find their proper places in our lives.

Comment 7

I am sure this is true; and once again, this is not the inevitable outcome of great loss. Learning from your own personal grief to be a better, more generous and compassionate healer is something you determined on. It is one of the noblest things about the human creature that we can wrest meaning and purpose out of tragedy.

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11.12.09

Comment 1

You know, I find this such a wise qualification., Esmeralda. I venture to say few of us have fully experienced grief because it is so varied and ever-changing.

Comment 2

Ouch! I wonder if this experience felt fake because it was fake. You could not be honest about the visit – although I wonder if there might not have been a way to acknowledge the family more humanely – and so there was a somewhat deceptive, guilty feeling that went along with the rounding. To me, there is nothing wrong with promoting student learning; but perhaps it would make sense to consider how this could be done in a way that respected pt/family members' final moments.

Comment 3

This sounds as though the very essence of loss was leached out of the experience!

Comment 4

Did you resent this? Did you find it sad? Were you appreciative of the sterilization process? In a way you were protected from the emotion of the experience, but I wonder if that wasn't a loss in itself.

Comment 5

Did you resent this? Did you find it sad? Were you appreciative of the sterilization process? In a way you were protected from the emotion of the experience, but I wonder if that wasn't a loss in itself.

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11.09.09

Comment 1

It is interesting Jerry to see how you start off – the language of medicine up to this point – and then, once the patient smiles at you, it becomes a human encounter!

Comment 2

Most patients don't understand this distinction either. Speaking from personal experience, it is devastating to be told "frozen section is cancer-free," only to be informed of a different reality later.

Comment 3

Ouch! Toast? I understand it is just "inside" lingo, but it is really dehumanizing.

Comment 4

I think here you are (indirectly) touching on your own grief. This lady whom you'd come to like and root for was now facing a likely terminal diagnosis. I wonder what you could do to help her and her family face this awful news? It is such a hard position for the medical student to be in... and of course even harder for pt and family.

Comment 5

I wonder what is the proper "professional image" when you have to tell, or help a pt come to terms with a life-threatening diagnosis. Not fall apart, for sure, but maybe showing some tenderness belongs there. What do you think?

Comment 6

When you know the prognosis is "not good," you have come face to face with the limitations of medicine. What can you do for this woman who has put her trust in you when you can no longer save her life?

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12.08.08

Comment 1

Do you think this helped or hurt you more?

Comment 2

Why didn't they want you to go to the funeral? Would you have wanted to be there?

Comment 3

Did anyone ever talk with you about this loss?

Comment 4

These are such important moments. Does your mom know how you feel? Do you ever talk about how she makes you feel?

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12.08.08

Comment 1

I think this is what we all want. It is nice that you recognized what he wanted and worked so hard to help

Comment 2

But you did know Mr. A. While he was not family, you may have come to have as much of a relationship with him as you do with some family members.

Comment 3

How will his memory affect your practice? Have you considered this?

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11.10.09

Comment 1

And so it begins. From that point on, your life will always be juggling personal and professional.

Comment 2

A wise observation, Paola. Grief is rarely the same twice. As Dr. Robitshek pointed out in class, so many factors influence how we grieve.

Comment 3

Yes indeed. It is easier to distance emotionally from someone old, at the end of their life. "That's a long ways off," you think. But the death of a person similar to yourself reminds you how close death can be.

Comment 4

I admire that you used this tragedy to question your own values and sense of meaning more deeply.

Comment 5

I think of this emotion as a kind of righteous anger at the unfairness and unjustness of the universe. It is the moment we all come to when we realize that life can indeed be cruel and capricious.

Comment 6

Nicely put, Paola. It can be a great comfort that in your efforts to heal and help, it is not all on your shoulders; and in the face of the big imponderables, we may just have to trust.

Comment 7

It is a great paradox that often our own healing from suffering comes through helping ease the suffering of others.

Comment 8

This seems like such a wise insight to me. Who can make sense of innocent suffering (although all the great religions have tried)? In the end, the greatest counterforce we have to death is love.

---

11.08.09

Comment 1

Yes, I think you're right, your great-uncle's death, although not perhaps sad in itself, connected you to the future loss of people you hold dear. In the grief of those who mourned this man, you could see your own future grief reflected.

Comment 2



What a good awareness, Joey. You allowed the experience of your great-uncle's funeral to help you reflect more deeply on issues of loss and grief, and how at some point – hopefully far in the future – they will enter your life in a personal way.

Comment 3

These are difficult choices indeed. I don't think there are right answers; but I guarantee you that, whatever you decide, by having considered your decision thoughtfully and from all angles, you will be at peace with it.

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11.07.09

Comment 1

I wonder, Preeti, did this have anything to do with not wanting to “distract” you during your studies? Did you appreciate this, or did you wish you'd been told?

Comment 2

It sounds as though, to the extent this is possible, your great-aunt had a “good” death

Comment 3

One of the great mysteries of life is how life can just “go on” in the face of loss!

Comment 4

Yes, the refuge of so many physicians and intellectual people – until we realize grief can't be “solved”

Comment 6

This is a comforting thought, yes? It's something I think we all hope we can say at the end of our lives.

---

02.03.09

Comment 1

What a profound realization. We often don't grieve after big changes in our lives, especially for something we have chosen to do. But this changed lifestyle is a big loss, and one that often makes people rethink their choices.

Comment 2

There can be joy in this too.

Comment 3

Given how you have been affected, this should be an important consideration for you.

---

Comment 1

Thanks for sharing about your grandmother. What a wonderful woman she must have been. The process of grieving that you went through was as healthy as it could be. And residual feelings of loss will always be there in one form or another...but always with a peaceful caveat that she left a legacy that impacted your personal faith through how she handled the most difficult time of her life. Thanks again.

---

Comment 1

Your grandmother was such a courageous woman. Through your narrative, I can feel her strength; a strength that she lost - at least physically - through her illness. But it seems that her legacy of moral strength effects you even now.

Comment 2

What a powerful statement...encapsulates her legacy of dignity. And I applaud you for thinking of how she would want you to be at that very difficult moment - to sacrifice your grief for her desires. I'm also grateful that you were able to "let it out" at a later time and work through your grief in your own way in your own timing. I know you will, as you said, acquire the skills to handle the daily loss that you encounter in the ED. It's so vital that you do. Hopefully our discussion today can stimulate some thoughts for you.

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12.01.08

Comment 1

Had you thought about it before you started school? So many students do not.

Comment 2

Do you ever wonder if it would have helped if you had been there?

Comment 3

Were you making this decision with your family or all alone. Either is hard, but that seems a big burden to carry yourself.

Comment 4

Does it ever go away?

---

02.03.09

Comment 1

It sounds like you might have been closer than you realize.

Comment 2

Did this make you sad? Did you miss her?

Comment 3

This is interesting. You had watched her decline for years, but her death still felt sudden?

Comment 5

So you experienced her loss twice, or do you feel like you had already lost her?

Comment 6

as this affected the way you take care of patients?

---

11.20.10

Comment 1

I know you know this is a common and natural reaction, especially to an unexpected loss. I suspect that as long as we "feel nothing," the loss does not seem real; so in a way it is a self-protective response.

Comment 2

My mom passed away this Aug. She and my dad had been married 70 years, and our family had the same fear – how would his life even make sense without her?

Comment 3

I don't think that's odd at all – it makes perfect sense. Our first brush with mortality triggers our fears of mortality in general; as well as makes us aware of our own vulnerability and that of those whom we love

Comment 4

to me this was a beautiful thing to share with your father. It was really a way of saying how much you love him. I wonder how he responded. I can imagine he might have felt uncomfortable, but I can also imagine that he might have been deeply touched

Comment 5

Medicine has always stood "against" death (I suspect because medicine is a product of humans , and humans have resisted and rebelled against their finitude from time immemorial) and ultimately it always loses. Death is the ultimate conundrum, insult, mystery... and it is unlikely that science – or philosophy - can ever "solve" it. But by examining our feelings about death, hopefully we can make our lives more meaningful.

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12.16.10

Comment 1

I am so very sorry to learn of the death of your mom. Your insights are basic only in the sense of being universal – a mother's love is unique; and parents provide a safe buffer against the vagaries of the world. I am glad to hear that, in the aftermath of her loss, you have found both healing and peace. In my view, it is less that we "recover" from loss and more that we learn its proper place in our life.

Comment 2

This complete lack of preparation must have made an already terrible loss even more difficult.

Comment 3

This is such a wise insight. The technical language of “defense mechanism” makes it sound like a shortcoming. But I think it is a way of surviving something that seems unsurvivable at the time.

Comment 4

Again, a very true insight. I am 61 years old and my mom died this summer. Although I was blessed to have her for so many years, I too felt this same loneliness and loss of security. There’s never a good time to lose your mom!

Comment 5

Ah, and this is the wisdom. Although the pain of loss never disappears, we don’t want it to because our memories of that dearly loved person are intimately bound up in the pain. And as you’ve discovered, the pain transmutes to some degree and healing is possible.

---

11.20.10

Comment 1

I am humbled and honored that you chose to share your story with me. Thank you. What an incredible – and incredibly hard - journey. I admire your search and what you’ve discovered – about yourself, about what you want to be and do in life, and the value of family and friends in that process.

Comment 2

Like many children, you rebelled against your parents. You were trying to find your path.

Comment 3

And what an amazing life it has become. I’m in awe at what you’ve achieved and where you are now. Perhaps the title of this essay should be “Lost and Found,” because you have certainly found yourself and your purpose in life... but I hope you still pick up an electric guitar every now and then :-).

---

12.19.10

Comment 1

Rainbow, this is an unusual, but very poignant example of loss

Comment 2

My son was 13 when his last sister left for college; and just as for you, it was a hard transition. He liked being an “only” child for a change, but he really missed his two big sisters

Comment 3

I’m impressed that at such a young age, you were able to muster the concept of sympathetic joy – taking pleasure in another’s positive experience.

Comment 4 How wonderful that you’ve been able to retain that sisterly bond :-)

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11.18.10

Comment 1

Sometimes our grief reaction is delayed – grieving makes loss real. Sometimes we literally do not have time to grieve in the moment. It’s very important, however, that you recognized what you needed to do, even if you could not act on that awareness immediately. Too often when we choose

(or when our bodies/psyche) decide to postpone grief, we never return to it. That's when the problems can begin.

Comment 2

as you know, emotional blunting, that "numbness", is a common and natural reaction to loss

Comment 3

Such a great question! I think we have all asked ourselves that, often with more than a little self-condemnation.

Comment 4

Well, you do sound as if you have a pretty great grasp of the underlying mechanism leading to this little boy's death. That's something :-)

Comment 5

Good insight. Sometimes taking refuge in facts and information seems a lot safer than allowing scary, overwhelming feelings to surface. Take a look at how some docs deliver bad news for example. They are managing their own anxiety, not their patient's.

Comment 6

And how can this barrier be softened, made a bit more permeable?

Comment 7

So long as you are willing to make an emotional connection with another, it isn't always that complicated, as you discovered, to refind that "emotional compass".

Comment 8

You empathized with the living, not the dead; in my view, that is as it should be.

---

12.10.10

Comment 1

so glad you chose to reflect on this kind of loss. I agree with you, the loss of idealism is very significant.

Comment 2

This is so sad, although of course it is what almost every student discovers. Partly there are many systemic things very wrong with the healthcare system; and partly we - patients and doctors alike - are fallible human beings whose priorities and goals can become very distorted.

Comment 3

I agree. As a non-physician, this was one of the most surprising and disheartening discoveries I made early in my career. How disappointing when "success" is defined by avoiding an admission to your service, which presumably is there to help sick people.

Comment 4

Good for you, Janet! It is easy - and understandable - to become cynical and disillusioned. You've figured out a way to look clearsightedly at the worst in medicine, and use it to establish your own priorities and reinforce your own values. I believe strongly that all of us must do what we can to create more humane and just healthcare systems. However, because we work in an imperfect system does not absolve us from personal responsibility for the way we behave and the choices we make on a daily basis.

Comment 5

Me too. There are many positive role models out there, and they can both inspire and instruct.

Comment 6

It is heartening to know that you do not dismiss your earlier idealism as simply misguided and naive, as I hear many students do.

---

Comment 1

I am grateful and humbled that you trusted me with knowledge of these difficult events. As you request, I will treat them confidentially. And please see that doing so *was an act of trust*. I am so glad you were able to do this. I hope it is not out of place or presumptuous of me to share a few thoughts back. My heart was deeply moved by what you wrote, and I just want you to know that.

First, you are incredibly brave to have reflected on this history. It is obvious to me how much work you have already done on the residual effects of this hard growing up, the tragic loss, at least in certain respects, of your childhood. But you are right – healing never takes us back to “the time before,” and it always leaves scars. You have the wisdom and insight to recognize your scars – finding it hard to trust others, wanting to be completely self-reliant so you don’t have to count on others. And no wonder because, although they were coping as best they could, your parents did let that little 10 year old girl down. She needed parents to protect her, and they could not do that. You had to save yourself, and how admirable that, small as you did, you were able to do so. You probably still feel you need to protect yourself; and one form of self-protection is to shut down our emotions. When we are emotional, we become vulnerable (if I admit something makes me happy, I could lose it; if I acknowledge something makes me sad, I can be hurt by it). So to be invulnerable, we have to pretend not to feel. But maybe now, as an adult, there may be another way.

What strikes me about all you have been through is that you are a survivor – you survived such a hard childhood, and in many ways flourished (as you observed, there were “positive” aspects of what you went through). Now may be the time for you to thank that little girl for surviving in the only way she knew how – but to recognize that you are in a different world, not everyone is your mother, father, and brother, and that this may be a good time to begin to explore (just explore) other ways of being. It sounds to me you are already letting down those self-protective walls – just a bit, and at your own pace. Keep it up! You’ve seen an ugly, painful side of life. You coped with it (amazingly well for a kid), and have forgiven those who wounded you. As you sense, there is also much joy and beauty out there. Don’t be afraid to go find it.

Wishing you all good things on your journey

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12.19.10

Comment 1

I am very sorry to learn of your grandfather’s death so recently.; and also for the unexpectedness. That can make it even harder to process the loss.

Comment 2

I think the loss of our grandparents is often our first intimation of mortality. We realize that great chain of being includes all those we love – and us! It’s one thing to know this intellectually, but quite another to begin to metabolize it personally.

Comment 3

Oh my goodness, what a shock this must have been for you and the whole family.

Comment 4

This is interesting to me. I would have expected the opposite. I wonder what it was about the two losses back to back that was easier to absorb. Perhaps, as you say, you were able to focus on loss in a very concentrated way

Comment 5

This is also interesting. Having just lost my mother this past Aug, and burying her 3 days later, I'm well aware of the flurry of instrumentality and activity surrounding her passing. It did give us something to do, but I wonder if we might not have benefitted from the kind of "pause" your family decided to put in place.

Comment 6

Yes indeed, I can see how the double loss would underline this sense of fragility.

Comment 7

This makes sense to me – as if the universe were saying, Scott, pay attention: the next couple of weeks are your time to grapple with loss. Don't try to wriggle out of it.

Comment 8

It is wonderful that you were able as a family to move into this space of celebration for the two wonderful men you'd been privileged to know.

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12.19.10

Comment 1

Although sometimes this decision to keep this kind of information makes sense, usually it is ill-advised. Those keeping the "secret" think they are doing it to help their loved ones, but often they are motivated by fear themselves. They don't know how to break the devastating news, so they just keep it to themselves. As in your case, the ones kept in the dark end up feeling helpless, out of control, resentful, guilty, and angry.

Comment 2

Your response is so understandable, Pounch. What makes this particularly hard to accept is that you had such a special relationship with this grandfather. You were really close to him, yet you were deprived of the opportunity to be close to him during his last days. No wonder you were angry and embittered. Yet your relatives were only trying to save you from suffering. I wonder what your grandfather would want you to do.

Comment 3

no wonder you have many unresolved feelings given how you learned about your grandfather's passing. Despite wanting to do the right thing, your family prevented you from preparing for his death and doing the things (such as visiting or calling more often) that would have helped you to grieve. I'm sorry that the assignment brought up such painful emotions, but they are signalling you that there is more you must do to come to terms with the loss of your grandfather. I wonder what some of those things might be. Could you write him a letter, even though he is gone, expressing something of what is in your heart? Is there some action you could take that would honor your grandfather, and bring you some measure of peace?

Comment 4

Despite all the suffering you endured after stumbling upon the fact of your grandfather's death, it sounds as though you've taken away so many invaluable lessons from this awful experience. Expressing love in the moment is perhaps the best - perhaps the only - defense we have against death. Your awareness that you will always seek closure and the opportunity to say goodbye I am sure will help you with future losses, but will also guide you in helping patients navigate end-of-life situations.

Comment 5

You already HAVE taken beautiful steps to honor your grandfather and keep his memory alive. Perhaps rereading his wisdom and sharing it with others will help soften his loss.

---

12.17.10

Comment 1

This is such a painful and powerful image

Comment 2

I really respect how honest you are being in trying to probe your motivations during this extremely difficult time.

Comment 3

I hear you – you felt you could have done more, sooner. Perhaps that is true, I can't judge. But don't lose sight of the fact that, when you were able to work through your own fear, you WERE there, reading, laughing, just being present with your grandma. This was a deeply good thing you did and a great gift you gave. Don't diminish it

Comment 5

This suggests to me that your grandma didn't want you to compromise your studies to take care of her. She sounds like a wonderful woman indeed. But be careful of being too hard on yourself. You were a young person trying to manage an overwhelming situation. Your choices may not have been completely selfless – when are our choices EVER completely this way? – but I hope you recognize that you were also honoring a desire of your grandma's to continue your educational path. I suspect if she were alive today she would be very proud of you.

Comment 6

Of course I did not have the privilege of knowing your grandma, but I have the feeling you have an awful lot of her in you already.

---

12.19.10

Comment 1

Losing a pet can be an extremely sad event. It definitely qualifies as a significant loss!

Comment 2

Now this is how the end should be. Contrast this with so many hospital deaths, those long, drawn-out, death-by-degrees affairs

Comment 3

This makes so much sense to me. You made him comfortable, surrounded him with love, and did not leave his side. If only humans were always so lucky!

Comment 4

This reminds me that endings are so important, as you phrase it so beautifully they can be the "ultimate expression of love."

---

12.11.10

Comment 1

You express this insight so beautifully, Brandon, perhaps only as someone who has been on "the other side" of the patient/family-relationship can.

Comment 2

, these are such wise words. I've never forgotten what a woman whose child had succumbed to leukemia told me when I was interviewing her about her family's experience. She was telling me how her child's illness had brought the family closer together, given them amazing insights,



strengthened their faith, and made them better people. The she stopped mid-sentence, looked me straight in the eyes, and said, "I would instantly give back all these things to have my child alive and healthy." Tragically, we can't make this choice.

Comment 3

All of us must "fight through" loss and grief in some way – but NOT necessarily by working! Work is often a way of hiding from loss and grief, which will come back to haunt us until we give them their due

Comment 4

I am so glad your classmates were there for you. It is only our relationships with others that can sustain us in these terrible times.

Comment 5

Yes, indeed. Every time you demonstrate caring, respect, compassion for others – in your work and in your life – you are honoring both your father and your other role-models.

Comment 6

This is a wonderful gift that you give to each of these patients. I so wish you didn't have to learn these lessons through your father's death; but you had no choice about that. The choice you do have, and the one you will have every day of your life, is how you will use the devastating loss of your father. If this essay is any indication, you are choosing to turn all that you and your family suffered to help ease the suffering of others. I can think of no finer way of honoring your father's memory.

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11.19.10

Comment 1

I am very sorry to learn of your grandmother Emma's passing, but glad to learn you had someone this wonderful in your life for so long. She seems like she was an extraordinary person, and it also seems like you had a rare intimacy with her. Your essay is, in a way, a celebration of her life and of your relationship with her

Comment 2

I think it is love, and were MT still with us, I suspect she would be honored.

Comment 3

It truly sounds like an amazing relationship. You must miss these moments deeply; yet it is evident how blessed you feel to have had such an intimate connection with her.

---

Comment 1

I hear what you are saying about the "seriousness" of your loss in comparison with other losses. In one sense, I agree. On the other hand, grief is grief. The loss of a relationship can be like a little death. Especially when it is your mom, who up to that point had always been there for you. Yet you extracted valuable lessons from the experience. Perhaps most important, you did not let this deep disagreement destroy your sense of self. Sometimes the process of differentiating from our parents can leave deep wounds on both sides - as you say, a sense of "damage." I hope that you and your mom can eventually find common ground on whatever issue divided you. That may not happen, but as in many difficult situations, it is never a bad idea to remain open to possibility. Thank you very much for sharing. Dr. Shapiro

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Comment 1

I am so sorry for the horrible loss you have experienced. This loss is quite complex since it involves a suicide. It is so hard for any of us to fathom taking our own life, as we are not experiencing the mental noise and illogical thoughts of a real mental illness. It sounds as if Bev had Major Depression.

Your mom and family were so kind and generous to add support and friendship to Bev's life. It was probably hard to realize that Bev was mentally ill when you were a child. Your mom went above and beyond to help Bev considering she was not a blood relative.

Your guilt of not keeping in touch more with Bev is understandable but I believe unfair. Your family did a lot to help Bev. Sometimes there is only so much we can do. I do not know if Bev was willing to seek help, comply with medications...all things that may have, but not necessarily prevented her suicide. None of these things were in your control. I don't know if this noncompliance contributed to the falling out with your mom.

I think it is truly difficult to stand in the shoes of a person wanting to end their life. Their illogical thinking often makes perfect sense to them. It is sad that Bev made this choice. It is heart breaking that her life was unhappy for many years, but please do not discount how much your family did to help her, even if it was years before. You all gave her times of happiness. Such a gift! Taking responsibility for her suicide would be a mistake. Ultimately, Bev had to want to help herself and to work with those trying to help her. I hope you can find peace in all the good times you and your mom gave to this very troubled woman. You deserve that.

---

12.7.10

Comment 1

what a difficult experience. You are using appropriate language to express your feelings – not being able to breastfeed, when that is such an intrinsic part of your expectations about bonding and mothering, can be devastating.

Comment 2

You have an excellent awareness of your various emotional states, which in my view is essential toward processing and ultimately letting go of this painful experience

Comment 3

In this final stage of acceptance, you are also able to do some valuable cognitive reframing. You are not minimizing the difficulties of not being able to breastfeed, but you're also seeing that it wasn't all negative – there were some “upsides.” Being able to acknowledge this is a sure sign that you are putting what was clearly a challenging event in perspective. I am so glad your baby is doing well – as are you.

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11.19.20

Comment 1

You are so fortunate to have had such a wonderful relationship with Duke, your beloved dog. Sometimes our relationship with a pet can be as close or closer than to a human because a pet's

love is the epitome of unconditional. It was great that all of you (your siblings) were able to say goodbye to Duke together. This was an opportunity to see how beautifully your family came together to support each other during this difficult loss and that has served to give you comfort. I think it is special that you buried your dog in the backyard and that you are able to visit his gravesite enabling you to feel close to him when you are home. As difficult as loss is, it is a time to reflect on the good your pet provided you and to remember to appreciate life at each moment. Thank you for sharing this personal experience.

---

#### Comment 1

My deepest sympathy on the loss of your grand father. It is difficult to lose a relative who lives far away but to whom you still feel close and connected. I think your trip 5 years ago when your grandfather was well was so fortunate and I am sure you will cherish the gold pen he gave you and perhaps pass it down as you tell your own kids about this special man. As upsetting as it must have been for your mom who did not make it to Shanghai before his death, I am sure it gave her tremendous comfort that you were there with him and told him not only of your medical school acceptance but that your mom, dad and sister were healthy and doing well. I agree with you that this info gave him peace as he passed away. What a wonderful final gift to him. Your experience reminds us to cherish each moment with our loved ones and to continue your close relationship with your family in Shanghai.

I hope you have a wonderful holiday season with fond memories of your grandfather.

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#### 11.17.10

Comment As you well know, this kind of delayed grief reaction often occurs. Perhaps we initially “feel nothing” because to feel something acknowledges the terrible reality of what has occurred.<sup>1</sup>

#### Comment 2

I wonder if there was anything you learned in this experience that you think may help you navigate patients’ deaths, or help you interact with family members

#### Comment 3

It is pretty extraordinary that your grandfather did not pass away until after you’d been able to see him. You’ve probably seen this phenomenon in terminally ill patients as well, when they survive until an important anniversary or a much-anticipated event. The human spirit is extraordinary.

#### Comment 4

Thank you for your lovely essay about your grandfather. As in your case, the death of a grandparent is often the first real loss a person experiences. It is a very hard one because of the way it reverberates across the different generations. It is sometimes the first time children have seen their parents grief-stricken and helpless. It sounds like the fact that you were at least able to see your grandfather and communicate your good news made his passing a bit easier to bear. I hope so. I made a few comments as well in the body of the text. Thank you again for sharing,

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#### 12.19.10

#### Comment 1

I had never thought about these more “distant” funerals in quite this way, but reflecting back on my own experiences, I can see the truth in your observation.

Comment 2

Indeed, in this death-phobic culture, most of us try to avoid reflection on the inevitable loss of those we love, yet I’m not sure this is a beneficial practice. It would be morbid to dwell excessively on this loss, but as you go on to say, awareness of mortality can also make us more appreciative of our loved ones.

Comment 3

This is the only “lesson” that makes sense to me when I contemplate death.

Comment 4

Have you wondered why that might have been? Perhaps you were not very close to him? Perhaps the idea made you uncomfortable or sad?

Comment 5

I can’t help saying, of course it was “enough.” You spoke sincerely and beautifully from your heart. I am sure it meant a great deal to your mom as well.

Comment 6

It sounds as though Joan’s death caused you to reflect not only on the possibility of others’ deaths, but also on the qualities of her life that you would like to emulate.

---

11.19.10

Comment 1

I wonder at this somewhat harsh self-judgment. But it is a question worth exploring. Why the difference? Maybe self-protection? Maybe it is easier to grieve at one remove?

Comment 2

This is your moral imagination at work, recognizing the dark underbelly of grief, how it can corrupt and poison our spirit with feelings of self-blame, anger, and jealousy.

Comment 3

Again, such a sensitive, perceptive, nonformulaic description of the nature of grief. Well-observed and well-written!

Comment 4

Here I see you as being willing to explore the nature of grief, willing to open yourself to and even “absorb” this woman’s suffering.

Comment 5

I suspect you have a very tender soul, Charitha. When you cry in commercials, you are allowing yourself to be touched by grief, not only for the scene portrayed on tv, but for all loss, including this mother’s. Your “easy” emotions accessed when reading a book or watching a movie are indeed a bridge back to the real world and real sorrow. When, God willing far, far in the future, you experience personal loss, it won’t be the same as these “shadows” of grief, but it will be familiar.

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12.19.10

Comment 1

This is so sad – and it happens to people too :-(

Comment 2

Of course it was hard to lose Holly, and all she represented, no matter how much you knew it was “for the best.” With people too, you sometimes feel death is the best of many difficult options, but the sense of loss is still there

Comment 3

That is pretty cool to have your dog as your role model for a satisfying and fulfilled life (. I bet your mom comes in a close second.

---

Comment 1

Funerals are unique experiences. They can really stir up feelings and fears of losing loved ones since we are faced with the reality that everyone dies at some point. It sounds as if Joan’s death provided an opportunity for you to fully consider how loss may affect you in the future.

Although difficult, I think it is good for us to reflect in this way. It helps us to remember to live in the moment and appreciate loved ones in a new light. As well, since death cannot always be anticipated, to remember to live your own life to the fullest each day. It is easy to forget this. In terms of your guilt of not visiting your uncle’s grave before, I personally feel we can “visit” the deceased anywhere and share thoughts with them. The grave is not the only place to do this. So I think you should feel at peace with your delayed visit. I visit with my deceased father when I am jogging. I don’t visit his grave often, but I feel close to him wherever I am.

It sounds like Joan lead a good life and touched many lives. She unknowingly sent you on an important reflective journey. I think she gave you a special farewell gift in doing this.

---

Comment 1

I have to say I LOVED your take on loss! In your essay, you transformed "loss" into "connection - very, if I may say so, *cool* :-). You reminded me that, as with so much in life, loss in this case in the eye of the beholder. As far as your remarkable grandfather is concerned, all I can say is, if I was going to share extra fingers with anyone, it would be him!

---

1.7.11

Comment 1

This can be a very significant relationship, and it must have been hard to realize it was something you would never experience

Comment 2

You express this very well. The suffering comes not only from the loss of the individual (whom you didn’t know well), but from the possibility of having relationship with him.

Comment 3

That’s amazing, Michael. It shows remarkable sophistication that you were able to identify a loss, and then find ways of addressing it. No one has a perfect family – for example, some grandparents are less than ideal! – and as we reach adulthood, we all need to engage to some degree in “reparenting” – finding ways to fill the gaps in our rearing. If we’re lucky, we find people who can give us what our parents (or grandparents) could not. This is not to blame parents/grandparents, most of whom do the best they can. But it is a sign of maturity to know what you need to grow and complete yourself, and then find ways to accomplish this.

Comment 4

I think in a strange way, by their absence your grandparents were very present in your life. You might say that they gave you a great gift through their absence in “directing” you toward a career where you can help find ways of treating one of the true scourges of old age – dementia. I suspect they would be very proud of you!

Comment 5

This is really touching, and I’m sure you were!

---

12.4.10

Comment 1

this was a truly beautiful essay. Never think again that you don’t express yourself movingly and deeply in written language. You do. But more importantly, you showed the courage to wrestle with a devastating situation – your mom’s cancer diagnosis.

Comment 2

As your friend’s psychiatrist father surely told you, this is a very common initial response to a crisis that threatens to overwhelm us emotionally. There is no one “right” way to feel. But we have to find the courage to allow ourselves to experience the feelings we have.

Comment 3

This is a really good question that you asked yourself. I think becoming a physician can complicate the normal grieving process. All of us can feel guilty that we can’t “save” the people we love . When you’re a doctor, these feelings can be especially intense, since this is what doctors are “supposed” to do. Also, many doctors take refuge in their doctor role, finding it an easier one to assume (checking labs, reading the pt chart) rather than surrendering to the grief and sadness of simply being a son or daughter , wife or husband.

Comment 4

Your mom sounds like a wonderful mother, trying to comfort you even as she faced this horrible diagnosis.

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Comment 1

thank you for these assignments, they were well worth the wait from my perspective as reader. The mini-essay about Joanna is heartbreaking. It captures poignantly the heavy weight of expert knowledge that being a physician brings. You know things about your daughter's condition that as a non-physician you would be spared - or at least eased into with the (hopefully) gentle guidance of a trained professional. But you ARE the trained professional, and here your brain "without your permission" performs the devastating calculations it has been trained to perform. I believe every physician knows exactly the terrible burden of knowing what you do not want to know. Your conclusion that you "are all changed" is profound. None of you can go back to that "innocent" time before the seizure; and you can never escape the awareness that there is a high chance it will recur. Indeed, your innocence is destroyed. The fact that you are able to bear witness to this loss is an act of great courage. (I also think - and hope and pray - that on the other side of facing this reality, you will construct a new way of being, and come to terms with what is. Often that seems impossible, and yet we are resilient creatures who keep finding ways to embrace life, no matter how many curve balls it throws us).

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### Comment 1

thank you for writing so openly and authentically. I am honored and humbled to be a recipient of this soul-searching. I hope it is not inappropriate to respond simply as one human being to another, as the issues you are wrestling with are, at some level, universal issues, although the specifics of course may be different.

As you might know, Freud said that the two anchors people have in life are love and work. When these are fulfilling and meaningful, we are happy (oversimplification but that's the general idea). Right now, you are struggling with both. That is scary and unsettling, as if there is no safe place to stand. It's a bit like being in free-fall.

But the "good news" is that you are paying attention. I hear you working very hard at a core level to understand what life is telling you. "Broken ways of relating," "deeply defensive," "self-protective," "how difficult empathy is for me." Wow, to me that sounds pretty *non-defensive*, pretty *vulnerable*, and pretty willing to view yourself and your relationship from a different perspective (the basis for *empathy*). Having the courage to acknowledge these "specks of dust" (as Buddhists talk about our imperfections – much nicer than the self-punishing metaphor of our shortcomings as a kind of poison contaminating our whole being!) shows how willing you are to understand yourself and your relationships (with your wife, with your patients) more deeply. Bravo!

I agree that it's hard and often nonproductive to sort out cause and effect. I also agree that it is all about being aware of your strengths and weaknesses, without self-aggrandizement but also without beating yourself up, and then being willing to work your edge; i.e., to challenge yourself out of your comfort zone. Experiment with what it's like to allow yourself to be more emotionally open, or to receive relational feedback as a gift that helps you grow rather than an attack. You can always retreat back into old patterns, but in the process of exploring new ways of being you might discover that your life can become more complete by, as you say, trying to stay present in each moment on as many dimensions as possible (intellectually, emotionally, physically, spiritually).

It is of course not my place to comment on either your marriage or your choice of career. But I will say you are exactly the kind of physician I would want for my own healthcare – someone who is willing to connect, empathize with my suffering, and see me as fellow human being. None of us ever gets these complex interpersonal processes completely right. But it is the willingness to try, to "show up," that distinguishes an outstanding doctor from a merely mediocre one.

Tim, I am pretty sure from this essay that the work you are doing now in your relationship and your profession is exactly what you need to be doing. Trust it, no matter where it leads. All best, truly.

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12.1.10

Comment 1

I agree that it is more of a both/and. Even though we might believe/hope in an afterlife, the loss of our loved ones in THIS life shouldn't be minimized.

Comment 2

ounds like a wonderful grandma. Often, there is something very special and nurturing about the child-grandparent relationship that supplements the more "responsible" role that parents have. Grandparents can be particularly good at accepting and loving their grandkids just as they are. You were lucky to spend time with your grandparents. It's also wonderful that you were able to appreciate and cherish this relationship

Comment 3

I wonder if this approach of adult-to-adult was something you appreciated, or was it hard for you?

Comment 4

That must have been a shock to hear this then from your father.

Comment 5

Oh, this is so sad. It is very hard to see our loved ones diminished. And yet the example shows indeed just how much spunk your grandma had!

Comment 6

This is such an empathetic statement on your part. Understanding the science of end of life does not make it any easier to let go.

Comment 7

ComIt sounds as though in many respects your family, and your grandma too, protected you from the real state of her health. I wonder if you're glad that was how they handled it. Would it have helped or made things more difficult if you'd had a more accurate understanding of how ill she was?ment 8

Comment 9

These are SUCH important lessons. Your grandfather's difficulty in letting go is so understandable. And what a brave and compassionate man your father must be to be able to understand and address both his mother's and his father's situation.

Comment 10

It sounds as though at the end, your family was ready to release your precious grandma. What you write about the funeral is very moving, and speaks to how important such rituals can be to help families connect and heal. It seems to me in calling her an angel, you said it all.

Comment 11

Many people feel similarly. The important thing is that you are reflective about what viewing the body means to you.

Comment 12



It is lovely that you still “turn” to thoughts of your grandma. In doing so, you keep her many special qualities alive in this world.

---

3rd file

1.12.13

Comment 1

We think of grief as an emotion, but in fact it is also a physical sensation.

Comment 2

This one brief image conveys so well your affection for your brother.

Comment 3

We don't want these terrible things to be real, and our brains do their best to make them “not real.” It's something to remember when we facilely say a patient or family member is “in denial” with the slightly pejorative connotation that they just “can't take reality.” When our reality turns horrible, most of us reject it initially

Comment 4

And sadly I'm sure you have heard parents making the same plea – “Take me instead.”

Comment 5

This is a very common fear among family members – children worry they will forget what their mother looked like, wives lament they can no longer conjure up their husband's smell.

Comment 6

This is a wonderful way of keeping Adnaan's memory alive, and will be very meaningful not only to you, but to the rest of the family as well.

Comment 7

It is very hard indeed to learn this lesson in this terrible way, but it's a lesson to cherish, perhaps the most important lesson we can learn about our fleeting and precious lives.

Comment 8

This is a wonderful awareness. It concretizes beautifully in simple acts how we can treat life as precious.

Comment 9

And when you think of these acts as a kind of gift from Adnaan, instead of burdensome, they become a privilege.

Comment 10

Yes, this is just true. I wish it were different, but it is part of how life works.

Comment 11

He sounds like a wise and beautiful soul. I think it is very powerful that his legacy of love lives on in you so vividly.

Comment 12

This is quite beautiful, and Erum, I see you adding sentences filled with compassion, caring, and love every day to your book.

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1.11.13

CThis is so poignant, Amisha, and also so well-said. Some of the hardest losses are indeed the ones that are “ongoing,” without a clear endpoint. omment 1

Comment 2

But what an amazing legacy your grandma has already given you.

Comment 3

I hear how hard this is, and understandably so. First, she sounds like a remarkable woman; and even more importantly, she is your “ba” and you do not want to lose this person.

Comment 4

You’ve bumped up against what literary folks call “the limits of narrative.” Words are all we have to express our loss, our grief, our suffering – yet they are startlingly inadequate compared to the experience of all these things. I think we all struggle with this.

Comment 5

I know what you mean, I think. It seems as though her very essence is disappearing.

Comment 6

This is the paradox of this twixt and tween state – there must be mourning for all that no longer is; yet “rejoicing” (what a beautiful word) for the fact that she is still with you in some way.

Comment 7

this is a touching and wise conclusion. You have learned both about loss and about life, and they are inextricably linked.

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1.12.13

Comment 1

This little anecdote makes me understand how dear he was to you.

Comment 2

This is the astonishing and inexplicable thing about terrible loss. At the time, it literally does not seem survivable. And those who experience it almost don’t want to survive it, it seems inconceivable. But then slowly the loss assumes a different place in their lives, a different shape, and along with the sorrow (which never dissolves), there is also joy and appreciation. It is the power of the human spirit.

Comment 3

I am always cautious about looking for “lessons learned” from people’s deaths, because it can sound as though the “point” of the death was to teach something to those still alive, which I certainly don’t believe. But it is true that we can find understandings and grow as people in the aftermath of such tragedies. I like to think that this is a way of honoring those who are gone.

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1.23.13

Comment 1

this is such an important observation. There is NO time, especially not formally designated time, which makes it so easy NEVER to address these issues. Unfortunately, you are the one who ultimately suffers as a result.

Comment 2

I’m sorry. It is very hard to lose someone who’s played such a pivotal role in your life.

Comment 3

He sounds like an amazing and inspirational man. You were lucky to have him as a grandfather, but all those wonderful qualities can make the loss more poignant.

Comment 4

Compartmentalization is often necessary in medicine, because of its demanding nature. However, it's when the loop is never closed, with the assumption that time alone heals, that we can run into difficulties.

Comment 5

We CAN "heal later," but even so, we usually need to allow ourselves to grieve first; and since this is hard, it's easy to try to ignore the whole thing.

Comment 6

As above, this is how many, many people "deal" with grief; and for good reason, but no one likes to face loss, no one likes to be sad, and angry, and despairing, and scared. But when we are dragged (often unwillingly) to just be with loss for a bit, we find we can somehow come to terms with it.

Comment 7

Another great insight! This seems like such a paradox to me. In fact, if you think about it, doctors even now are often not very well trained "to help others through..." as opposed to treating the diseases that have created these incredibly difficult times. I think as long as doctors see death as "the enemy," rather than in more nuanced ways, they will be ill-equipped to deal with patients' grief or their own

Comment Well said. We all fear that our sorrow will incapacitate us, and sometimes it does – for a week, two weeks (oops, and then you're diagnosed as depressed – sorry, I do not necessarily agree with DSMV on this point). But THEN we discover that although we are brokenhearted, our lives can go on, and usually in very rich, fulfilling, and meaningful ways.<sup>8</sup>

Comment 9

I am very glad to hear this Anshu. In a way, although it is hard to experience, our grief honors those we have lost. It also teaches us a lot about life, and helps us face issues of impermanence. Sometimes I wish life were different, but since this is what we are given, it is wise to face it as clear-sightedly as possible. When we are able to look, with sorrow but ultimately with acceptance, at loss and death, we are in a better position to help and support others who are facing the same experiences. As you say, it is our humanity that binds us together in these moments, and (thank goodness) doctors are still human beings.

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1.13.13

Comment 1

you tell about this terrible night so vividly that you make me feel the shock, helplessness, and anguish as well

Comment 2

I wonder how you felt as a witness to his grief. It can be hard to see strong, in control, competent and capable people express grief. But it can also be reassuring to see this common humanity.

Comment 3

This is an excellent and wise insight, Asheen. Sometimes we make assumptions about how a person "should" react in the face of loss. The reality is, everyone grieves differently, and we should allow space for these different forms of grief

Comment 4

Yes indeed. At such times, everyone needs support and comfort, all the way in which they can receive these things may differ.

Comment 5

Interesting. Perhaps they seemed unfeeling or not sufficiently expressive of their emotions? Yet as you learned with your uncle, the sorrow was there, waiting for that moment when he could release it.

Comment 6

Perhaps it is that grief is universal, but how we manifest is influenced by our personality, upbringing, family, culture, education etc. In these difficult situations, our emotions are roiled, and it is easy to judge others, because we are feeling so helpless and distressed. Tread gently, compassionately, and nonjudgmentally, as you said above.

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01.7.13

Comment 1

I am so very sorry, for him, for his family, for you

Comment 2

Yes, this is a good description. Life is going along normally and then you are hit with a truly devastating blow.

Comment 3

Yes, exactly. Your brother-in-law needs to feel that he is not being abandoned, although there is no way to save him; and his family needs to feel that they are not abandoned as they try to come to terms with this terrible loss

Comment 4

You're right, it is never enough, but it is what we have to offer each other, and it matters a great deal.

Comment 5

When bad things happen in our lives that we cannot control, we still have a choice. They can make us bitter and angry (which I actually completely understand), or we can try to wrest some good out of them. I am very careful never to say to people who are suffering that these things happen for a reason; but I do believe if we choose, we can wrest meaning, compassion, and empathy out of them so that a little good comes from something very bad.

Comment 6

And your willingness to be there in this way for them is very important.

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1.16.13

Comment 1

It sounds like your family was always there for him.

Comment 2

What a terribly helpless situation this must have been, especially since your family had been used to having him close at hand, where they could interact with him and oversee him more easily.

Comment 3

You were doing your best, but it seems as though for his own reasons your uncle did not want you to see how ill he was or perhaps did not want you to become involved in his care.

Comment 4

This "decision" must have been inexpressibly painful for the family. It is so hard to understand.

Comment 5

I think, as you progress through your medical career, you will encounter people who do “choose” to die. Sometimes these people are depressed or in great pain, and appropriate medication enables them to change their minds. But some people, often after a courageous fight, and when there is no realistic hope of meaningful recovery, do feel it is time to let go and not pursue further treatment.

Comment 6

The question in my mind, as I think in yours, is “Why did he refuse help?” Was he depressed? Did he misunderstand his condition? He sounds like a very private, closed-off person, so perhaps it was difficult for anyone in the family to really know what was going on with him.

Comment 7

you raise some excellent questions. Perhaps your uncle had moved quickly to an acceptance of the end of his life. Perhaps he felt that the cost of treatment was not worth the low chance of meaningful recovery.

Comment 8

Another excellent observation. The medical system tends to assume that people who refuse treatment are depressed or lack understanding of their situation. Your uncle’s response suggests that under the right conditions it can be a reasonable even sensible and logical choice to accept death rather than resist it.

Comment 9

Becoming more comfortable with death and dying is so important for a physician, because this relative comfort can help patients face their impending demise with less fear.

Comment 10

Yes absolutely, adding the caveat that these decisions are truly informed and truly effect the patient’s value system, desires, and priorities.

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1.9.13

Comment 1

Loss at that age can have a powerful effect on us. When you see something "anomalous" ("I don't get excited about my birthday") it can be a cue to look deeper. Not everything needs investigation, of course, but sometimes we do discover unresolved issues.

Comment 2

Again, very insightful and perceptive. It was not necessarily that you were so close to her, but because her death showed you the vulnerability of people you thought were invincible. I lost a grandmother when I was 8. I did not know her well (she was an alcoholic, and kept at some remove from us kids), but my mom's reaction was really frightening to me, and definitely impacted me down the road.

Comment 3

Yes, this is the vulnerability of life, you know at some point you will lose her - hopefully many many years hence! - and there is no way to prepare for that.

Comment 4

And this may be where grief gets complicated by regret - if only you'd had the chance to know her more deeply and learn from her (she sounds like a remarkable person). To me, just thinking what you MIGHT have learned from her is still a way of learning from her.

Comment 5

Haha! You never know, she might have been pretty impressed too :-)

Comment 6

I wonder in what sense you mean "effective." Suppressing emotions, as you know, can lead to a very mechanical way of being in the world, which while self-protective in some ways is harmful in other ways. On the other hand, working through unresolved feelings about death and dying (do they EVER get fully resolved?! I'll let you know if I ever figure that one out!) can make you more available to help others deal with loss. But in my view, we all need to make space in our lives to grief when that is required. It's a paradox, but often we find our lives are fuller as a result.

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1.9.13

Comment 1

Such a good insight. I really like this, Greg. It's something to keep in mind as well in terms of the losses patients suffer and HOW THAT REVERBERATES with their families and loved ones.

Comment 2

Dr. Koons would be proud of you. Simple to say, hard to do. We want to fix it, but you can't fix death; and sharing grief requires someone on the other end strong enough and compassionate enough to receive it.

Comment 3

Very wise. Pity is a demeaning and distancing emotion. It says, "Thank God you rather than me."

Comment 4

Excellent. This can be so hard to do, because to be "present" you need to be ready to really "be with" the suffering of the other. But with some courage, it can be done; and when it happens, it often makes the grieving person feel less alone.

Comment 5

Right, I think your point here is that there is no one "correct" way to support a grieving person, although there are plenty of ways that usually DON'T work (a la Dr. Raphael's list of do's and don'ts).

Comment 6

Great self-awareness. Some situations in life are not problems to be solved. Through your experience with your wife and perhaps with patients and families, you've come upon a lot of important wisdom.

Comment 7

Again, very well said. It is the OTHER PERSON'S journey, and it is surprisingly easy to make it our own, which kind of defeats the purpose.

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1.9.13

Comment 1

I am truly sorry. We did not intend to exacerbate your grieving for your own mom. Nevertheless, I hear that the presentation created additional and unhelpful suffering. I apologize to you.

Comment 2

In contrast to DSM, I don't think we can "pin down" the trajectory of recovery. It is a process full of fits and starts.

Comment 3

And you were – nothing can change that you were cut short in that adult-adult relationship with your mom. Forty-eight is so very young.

Comment 4

I think the timing was particularly regrettable. As you said above, you'd just finished your annual grieving, you'd just come through a series of exquisitely painful dates, and then we forced you (inadvertently, but still...) to visit them all over again. No wonder you felt angry.

Comment 5

I wonder if you may have felt undermined or betrayed by this session. AoD is supposed to give you resources and build skills; instead, although we did not mean to do so, we “compelled” you (it is a required session) to be submerged in emotions when you did not want or need or could find any value in doing so. I think it was a big oversight on our part not to better prepare students for this session; and give them the option of not attending without penalty. Again, all I can say is I deeply regret causing additional suffering.

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3.22.13

Comment 1

I'm sorry, I know this is a tough assignment for many students. Thank you for tackling it, and I hope it was helpful to you in some way. .

Comment 2

Definitely. The loss of a beloved pet can be as devastating as the loss of a person. Grief is an equal opportunity employer

Comment 3

You know, Catherine, I think this is EXACTLY how people feel when they see their loved one brought low by disease and disability. As well, the idea that someone you love is suffering is very distressing.

Comment 4

Another common response to impending loss. “I wish I'd done xy and z more, said this or that.”

Comment 5

You see, from your lab's death, you recognized a universal response to grief – those we love can be taken from us quickly, so try to live in a way that won't leave you with regrets. Cherish your dear ones and let them know you love them.

Comment 6

I'm glad your dog died without extended suffering. Family members often experience feelings of relief at the passing of a loved one, precisely for the reason you state – their suffering has ended.

Comment 7

In one of his novels, Fyodor Dostoyevsky tells the story of a man before a firing squad. About to die, he prays, “If only I could live, I would appreciate every single second of my life.” Telling this story many years hence, he sadly confesses that very quickly he returned to his normal ways of living, annoyed with small things, lacking gratitude for life itself. As you say, this is part of our humanness. The philosopher Carlos Casteneda advised us to “take death as our advisor,” not in a morbid sense but as a constantly present reminder that life is fragile and ephemeral, and we should consciously acknowledge its gift every day. Hard to do, but makes for a better life I think

☺

Comment 8

Very true, physicians are surrounded by these reminders. It's all about paying attention

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1.9.13

Comment 1

Yeah, absolutely. Death is the mama of losses. It is one I too have struggled with since I was young and still have not fully come to terms with.

Comment 2

Good insight, and a perceptive distinction. The hurt is less for your personal loss, and more because of your empathy for those who are deeply feeling the loss. It's sometimes what we feel toward the family of a patient who expired but whom we didn't really get to know.

Comment 3

And this too is a subtle difference. Some deaths are expected, anticipated, and even in some sense looked for. In this case too, you are grieving for the pain of another.

Comment 4

It is hard when we see the vulnerabilities of those we thought invincible.

Comment 5

Yes, this is YOUR loss, you are grieving not only for his parents and his classmates (although this is part of it), but it is also because of the deep hole he left behind for YOU

Comment 6

And this is why sometimes people don't like to name their loss, to share it with others, because with each telling, it becomes more real. However, this can also be healing.

Comment 7

It was caring and sensitive to realize that his family's grief was even more profound, but in a way grief is grief, it doesn't need to be compared. Your heart was breaking, as were the hearts of so many, and that is probably what needed to be recognized

Comment 8

When we lose someone dear, we often have these kinds of regrets – if only. If we were truly able to keep death as our advisor daily (not in a morbid sense, but in an aware sense), it might make all of us just a little kinder, a little more thoughtful.

Comment 9

This is so well put, Iman. Feeling is almost unbearable, but not feeling anything seems worse. There is space in the middle, and I hope you have found it.

Comment 10

Comment 11

And yes, that is exactly what you, we, his family, all of us were doing – in our shock, denial, anger, guilt, regret, joy remembrance – we were grieving.

Comment 12

When we lose someone we loved, many of us think we can't go forward. But we do – and that's a good thing. Thinking about Tommy, you and I know he would not want anyone mired in grief or guilt. He would want people that carried on his spirit.

Comment 13

Yes, me too. I sometimes still feel sad when I think of his young life with such potential snuffed out, but I also have happy remembrances. When I see what an impact he's had on your class as well, I'm proud of you all. I'm always cautious about saying loss has any meaning, but I do believe we can find meaning or make meaning. It doesn't make the loss okay, but it is a way to go forward.

Comment 14

I'm very glad you've come to this place; and I suspect Tommy would be glad too, yes?



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1.11.13

Comment 1

I am truly sorry. Death is always hard, but somehow it just seems unfair and “wrong” when it is such a young person with his whole life ahead of him.

Comment 2

This is such a good insight, Jackie. We think distance insulates us from the details of dying, and I suppose this is true in some ways; but it also exacerbates helplessness. It is hard to be supportive and helpful at a distance.

Comment 3

This is also an important awareness. Often (and especially if you’re a physician) it’s easy to focus on getting the facts, the diagnosis, the information, the details. Of course, it’s not bad to want these things, but sometimes they are irrelevant, and sometimes we spend a lot of time on these details when that time could be spent in other ways. I think it is all about control – knowledge is power, right? But sometimes it isn’t, sometimes it just doesn’t matter.

Comment 4

Yes, although this must have been a devastating leavetaking, at least you had it. When large distances are involved, and the person just dies, it is difficult to connect with the REALITY of their passing. Explicitly saying goodbye makes the eventual death more real.

Comment 5

This seems very familiar to me. It is both hoping and knowing, and I find that many people are able to maintain both without contradiction.

Comment 6

How fortunate you had this experience as well, although this too must have been so painful. I suspect that it gave them closure as well. After all, you were part of his American family.

Comment 7

I think it is an almost unimaginable grief for a parent to lose a child. Some parents find it very difficult to recover; and then, as you saw, other members of the family suffer. That kind of “arrested grief” can be a sign of depression. Parents often feel tremendous guilt that they are still alive while their child is gone; and sometimes they need professional help to give them permission to move on.

Comment 8

Indeed, this must have been such a challenge. It is a good example of how countertransference issues (to use the psychiatric term) can have such a powerful influence on clinical interactions. But your awareness of what was happening enabled you to turn this toward empathy and understanding for this patient’s family.

Comment 9

I think it’s quite wonderful that, rather than avoiding the patient’s family because of the way they reminded you of your friend, instead you chose to both move closer to their suffering and to reach out to Giacomo’s family as well. To me, this shows great courage. It shows that you were able to be present with everyone’s pain – the PICU family, Giacomo’s parents, even your own. This solidarity in the face of our shared vulnerability is, I think, what makes us human.

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1.11.13

Comment 1

It sounds like the two of you had a rich and close relationship. It makes you very lucky to have known him so well, but it also makes his loss that much harder.

Comment 2

Yes, you were grieving not only your personal loss, but all of theirs as well. It was like grief exponentially enlarged

Comment 3

this is an important insight, because it is true for some many “caregiver” type people. We take care of others, which is wonderful and giving, but it is sometimes a way of hiding from our own emotions and avoiding having to deal with them.

Comment 4

I remember how wonderful I found the class’s support of each other in this time of grief. That solidarity in suffering is sometimes the best way to help each other and to help yourself.

Comment 5

When something terrible happens, sometimes we are not only brokenhearted, we can also be angry and resentful and blame the deceased. We want to believe this terrible thing didn’t have to happen. But these emotions are usually a defense against our sorrow.

Comment 6

Eventually our feelings usually reach a kind of acceptance – often not perfect, but the grief, while never disappearing entirely, finds its proper place in our lives.

Comment 7

This seems to me an important recognition. In fact, we don’t WANT to forget about the people whom we loved and were close to. We just figure out a way to hold them in our hearts with joy as well as sadness.

Comment 8

It sounds as though you have, and I suspect this is exactly as Tommy would have wanted it.

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1.11.13

Comment 1

I understand exactly. I think we do not LET ourselves believe it because we know that once we do, a whole slew of terrible emotions will follow.

Comment 2

I understand that. There are many gender, familial, and cultural norms regarding tears and expression of emotion. There is a difference, obviously, between feeling something and sharing it.

Comment 3

This is so well said, Javier. It really captures that open-hearted intimacy that can arise at a memorial, while balanced with the absolute finality of the loss. It is a strange, uplifting, and heartbreaking experience.

Comment 4

At least in my experience, guilt and regret often arise in response to a significant loss. I felt these emotions when my mom, with whom I had a complicated relationship, passed

Comment 5

That is such a painful thought. Yet I suspect that even if you had had those extra hours, they would not have really softened your grief. We look around for “what would make this better,” but the fact is, nothing will make it better, except you and your classmates supporting each other and memorializing Tommy in ways that continue the legacy of his bright spirit.

#### Comment 6

I'm sure you know that is not uncommon. Again, our mind simply "creates" what we want.

#### Comment 7

You know, this is true on a literal level, but I wonder if it can be true in a different way as well. My hope for you is that you could "find" Tommy in aspects of yourself as a doctor and as a person. I don't mean to sound trite, but in that way I think of him as still among us.

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#### 3.8.13

##### Comment 1

Many of your classmates wrote about Tommy. I knew Tommy as well, and actually reading all these affectionate thoughts about him has helped me come to terms with his loss.

##### Comment 2

How funny. Tommy's reading of that character has stayed in my mind as well. It was quintessential Tommy, uninhibited, throwing himself wholeheartedly into the experience, finding the humor, getting the point. I also saw him later that day to work on a recommendation letter I was writing for his application to an MFA program. Because I'd seen him so recently, so full of life, it made his death almost impossible to accept.

##### Comment 3

I really agree with this. Tommy would have made a great doctor.

##### Comment 4

This is a truly wonderful way to honor his memory. "Am I being the kind of doctor Tommy would have been?" is a perfect touchstone to have as you move forward as a doctor and a healer.

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#### 1.12.13

##### Comment 1

I think this is a familiar coping strategy for most of us, but unfortunately stuffing and avoidance aren't the same as resolution.

##### Comment 2

I'm sorry this was so painful. Facing our griefs often is, and it's important not to do damage in the process of trying to make things better. Sometimes, when I try to go "in and through" with a particularly difficult issue, I worry that I will get "stuck" in the middle and never be able to reemerge. Fortunately, usually it is the case that by confronting our fears, we are able to reach the other side and, in your wonderful words, see that the structure will indeed stand.

##### Comment 3

This is another terrific formulation. We like to think we "own" our bodies, our minds, our talents, our abilities, but another way to consider them is that they are merely "on loan" to us (from God, from the universe). Rather than be resentful when they disappear, we can choose to be grateful for the time we had them to use. I must admit I don't always feel this way, but when I can find this perspective, it is very freeing.

##### Comment 4

Yet another remarkable turn of phrase. You are a talented writer. Grief, indeed, will have its day, one way or the other. It cannot be escaped, but when we face it, we discover it can be survived.

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### 1.17.13

#### Comment 1

For most students, this is a difficult and memorable event. I've noticed that even long-time experienced physicians easily recall their first patient death.

#### Comment 2

It's wonderful that across language and culture, with a patient who could make no sound, you were able to learn so much about him.

#### Comment 3

The dichotomy that you observed raises such a challenging and complex issue. When the assessment of the patient is made according to purely objective criteria, it may lead in one direction; when the "human factors" of personality, desire etc. are included, it may lead to a different conclusion. In this case, it sounds as though the personal knowledge these team members acquired enabled them to have a more accurate understanding of what the patient would have wanted. He and his family had fought so hard for his life that it seemed fair to continue that fight – at least within reasonable parameters as you say.

#### Comment 4

I am so touched whenever I learn that a student (or physician) go beyond the letter of duty to maintain their human caring and concern for that patient.

#### Comment 5

These interactions with the family clearly indicate that you were the one they trusted and bonded with.

#### Comment 6

That is quite wonderful. Again, it is a testament to how much they appreciated your efforts on their father's behalf.

#### Comment 7

I have heard many physicians express a similar dichotomy. Physicians still tend to feel a sense of failure when the patient dies. Often the family, despite their grief and loss, are able to recognize just how much the physician gave them in terms of kindness, caring, and respect.

#### Comment 8

What a wonderful tribute. I wonder how you'd sum up what you learned from this experience: Perhaps the importance of trying to understand the perspective of patient and family, even when it differs from the purely medical perspective? Perhaps how important it is to be the voice of the patient when the patient cannot speak for himself or herself? Perhaps that although caring about a patient can wound your heart, a wounded heart can make for a better doctor? In any case, I'm glad you paid such close attention to everything that happened with this patient. It is clear that you have grown a lot as a physician as a result of knowing Mr. T and his family.

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### 1.11.13

#### Comment 1

I completely understand this, no apologies necessary. You are not the first to run up against the limitations of language when trying to talk about loss and grief. It is an imperfect tool, but it is all we have.

#### Comment 2

This seems like an empathetic response focused on the suffering of others. It is more how a physician might feel who didn't know a patient well, but sees that the patient's passing is causing

great suffering for the family. I wonder whether, despite this person being a friend and teammate, you might not have been very close

Comment 3

Okay, so that kind of shoots my theory out of the water. Tommy was a good friend, but you were not devastated by his death. Could you be someone who is very resolved about death? Do you see it as a gateway to eternal life for example? Might you see death as a natural part of life?

While death often triggers outpourings of grief in many cultures, there are other responses (for example, look at how many Tibetan Buddhists accept death) that are not “weird” just different.

Comment 4

In a way, by taking over much of the instrumentality in their lives, you created a space for them to grieve. Many people who have lost a loved one say that what they really needed was not tea and sympathy, but someone to bring dinner, repair the car, sort out the medical expenses. These tangible acts are a kind of compassion-in-action.

Comment 5

This is what I was wondering. Sometimes we “don’t feel anything” because we are in shock, or because we are frightened of the implications of strong emotions to our own sense of control. But sometimes we are not overwhelmed by negative emotions because (however it happened) there is a kind of “radical acceptance” of what is. I wouldn’t presume to say what is true for you, but it does sound as though your reaction is not defensive or self-protective.

Comment 6

Of course, belief in an afterlife makes it easier for some (although by no means everyone) to accept death and dissolution of the body.

Comment 7

I am truly happy that you have attained this level of acceptance. As you’ve already discovered in your personal life, it will make it much easier for you to acknowledge, be present with, and support others in their own grieving process.

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### 1.10.13

Comment 1

you are right to distinguish between these different types of death. Death is difficult no matter how it occurs, and each kind of death has its own particular challenges. Losing young people is especially hard because, in this time in history, the young aren't supposed to die, so it seems unnatural and just "wrong." Sudden death also has the factor of shock, the "unbelievability."

Comment 2

Whether "reasonable or unreasonable," given your life experiences, it is certainly understandable.

Comment 3

What I'm realizing is that, to share that information, that must have been the information you had. What a horrible thing to have to discover about the brutality of life at 13

Comment 4

And I imagine because of the level of horror involved that adults (parents, teachers, counselors) may not have been able to contain their own fear and terror, so that all you kids lost a sense of safety.

Comment 5

These are all devastating losses, this last one especially. Because you drove the same route, and realized it indeed "could have been you," it is natural to feel that it might well be you. Terrible

things happen, why couldn't they happen to you? The truth is, most people (especially the young, but all of us to some degree) live within an illusion of control and invulnerability. It is only when it is punctured by the kinds of events you describe that we realize how fragile life is.

Comment 6

These are such hard questions to contemplate. (Buddhists monks spend decades meditating on the decomposing body in great detail in order to learn "non-attachment" [!]). I too, because of some childhood experiences with death, spent many years ruminating on similar scenarios. At some point I tried to figure out which thoughts might help me to lead a better existence in the life I still (thankfully) had; and which were merely creating useless suffering for myself.

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3.26.13

Comment 1

In the face of others' grief, we often feel inadequate. And in a sense we are. But from another perspective, we are all each other has, and so we must offer ourselves even with our limited skill and resources.

Comment 2

I respect that you were willing to move closer to this patient's suffering, rather than self-protectively trying to avoid it

Comment 3

This was an important motivation on your part. You weren't simply trying to "educate" about grieving, you were trying to reduce her emotional burden so that, in addition to her grief, she didn't think she was crazy as well.

Comment 4

Sometimes just being willing to be with another, to listen to them, is more valuable than educating them or giving them information.

Comment 5

Excellent insight on your part. I cannot begin to imagine the guilt and self-blame this mom must have experienced, although of course she did nothing wrong. But the "if onlys" must have been unbearable.

Comment 6

Another excellent insight. What will motivate her to go on? What does she have to live for now? These were important questions to bring to the fore. In addition, you were able to help your patient shift her focus from herself (grief is often very self-absorbed) to others, and in doing so, helped her recognize that, despite the terrible sorrow in her life, it is not bereft of joy

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1.13.13

Comment 1

your grandpa (and grandma) sound like wonderful people, and inspiring role models. You are so right – it's a gift to have had them in your life.

Comment 2

This also is true. Nothing ever makes death "fair" in my view. If people are so wonderful, why should we have to lose them?! Even a long life is such a drop in the stretch of time. These feelings and questions are very familiar to me too.

Comment 3

Yes, every death is a reminder of the fragility (and therefore the preciousness) of our life and the lives of those we love.

Comment 4

This is very painful, it has been described as a kind of “living death,” in which the person is still with us physically, but has disappeared in so many significant ways

Comment 5

Sometimes one of the “gifts” a death or dying can give us (albeit a very painful one) is to help us reflect on these difficult issues and discuss them with our family members, so they understand our wishes. Because all of us will have to face such situations, despite how hard it can be, it is valuable to have discussed them before they descend on us with all the chaos and strong emotions inevitably involved.

Comment 6

I am so moved by your “decision” of where to put your focus – on gratitude, appreciation, thankfulness, and not-knowing. Death is a mystery we will likely never fully understand. What we can do is to focus on living as fully and gratefully as possible, and try to ensure that our lives honor those who have gone before.

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1.11.13

Comment 1

That is interesting. As Dr. Koons pointed out, “stages” of grief does not well described the jumble of responses, the looping back and reexperiencing what we thought we’d left behind, that constitutes grieving.

Comment 2

you’re right that acceptance is what makes mourning a loss possible. You can’t do this when you’re angry, bargaining, in denial. But you’re right that you can be accepting AND be bargaining/denying/angry/sad almost in the same breath.

Comment 3

That’s amazing self-awareness. It shows great emotional intelligence to be able to consciously “check out” of bargaining.

Comment 4

One of the emotions that’s easiest to deny is anger, because it seems like an “unacceptable” emotion. We can’t start working with it until we recognize it and let it in.

Comment 5

Absolutely. It is not pleasant to feel anger, but very often when people are experiencing/expressing anger, it covers over, exactly as you say, a deeper, more vulnerable hurt. Great observation on your part.

Comment 6

I like this idea of “paying a visit” to various stages of grief. In my experience, that is a perfect description of what actually happens. And then, as you note, you “land” in acceptance that is on the other side of all of these other emotional responses. And even that acceptance is not perfect, complete and unchangeable.

Comment 7

And that’s why it’s better to think of grief as a process rather than an event.

Comment 8

Of course this is my bias, but I think it is the capacity to learn from our mistakes, as you say, that enables us to grow as individuals, and not keep repeating suffering over and over.

Comment 9

I wish it weren't so, but you are right, there is no way to escape pain, suffering, and loss in life. Thank goodness there is a lot more joyous things to life, but we have to make room for this reality as well.

Comment 10

This, to me, is healthy resolution: not that the grief has disappeared, but that it has taken its "appropriate place" in your life.

---

1.8.13

Comment 1

In addition to his many other interests and talents, he was very interested in creative writing. Two days before he died, I'd met with him to discuss a recommendation I was writing in support of his application to MFA programs.

Comment 2

That is such a good description of sudden loss. It is truly unbelievable – it takes a long time to absorb the shock, it is as if our minds just can't, or won't, accept what has happened..

Comment 3

Yes, I know students (and faculty) really pulled together and supported each other. It helped a lot.

Comment 4

I think this is so interesting, and at least in my experience and those of others I've known who've experienced significant loss, a very accurate description. I don't think the sadness ever passes entirely, but it finds its "proper place" in our lives, and we are better able to remember not only the death of the person who is gone, but their rich and beautiful life as well.

Comment 5

I believe this to be so. I am always cautious about saying that a devastating loss "means" something. It is just loss, and must be grieved as such. But I do believe we can choose to find meaning, even in the greatest tragedies. And the Tommy I knew would want to be "carried forward" in each of you, to inspire you to be the best doctors you can be. I can't think of a better legacy.

---

1.15.13

Comment 1

I was in AZ visiting 3 of my grandkids, and I remember reading the same email over and over; and thinking perhaps it was a different Tommy Hand.

Comment 2

He was indeed a funny, warm, creative person.

Comment 3

That is interesting to me. I didn't know he rode a motorcycle, and I remember being shocked. "He was a medical student. Hadn't he seen the results of motorcycle accidents? How could he have done something so risky?" I was angry too, and I blamed him.

Comment 4



Indeed. One of the best things that happened I think for your class was the memorial service, as well as other activities that allowed you all to grieve and reminisce together. At times like these, we need to give support to others and be supported in turn.

Comment 5

Many people (including myself) who experience a grievous loss can feel resentful that we are expected to return to ordinary life so quickly “as though nothing had happened

Comment 6

Perhaps a way to look at it is that we look for a way to integrate the loss into the lives that must, and should move forward.

Comment 7

We need each other and we need to keep living. I especially agree that “moving on” means making the decision to embrace life in the face of death. I think in most cases this is what the person who has died would want

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1.11.13

Comment 1

What a terrible shock and loss both for mom and grandma.

Comment 2

Exactly, grieving cannot even commence until everyone realizes what has really happened.

Comment 3

A very empathetic statement, Bethany.

Comment 4

Good observation, absolutely as Dr. Koons also noted, it is not a straight line, a neat progression. The stages go round and round, in no particular order, often ambushing the person.

Comment 5

This is an important point that perhaps we did not emphasize sufficiently in class. Grief looks very different when experienced by different people. It is influenced by age, gender, family, culture, and personality, to name only a few things. We need to be careful not to make erroneous judgments about others with very limited knowledge about their true feelings

Comment 6

Good for you for attending so carefully to what was going on with the family members. This is not voyeuristic, but is essential if we hope to be able to reach out to this family (and others) in ways that are respectful and perhaps even healing.

Comment 7

Yet I would be careful about the “phrase” very little. If the team was actually able to be present and supportive, that is a great deal, and I suspect was deeply valued by the family.

Comment 8

This is what we all wish in the face of terrible loss. We are inadequate – we cannot fix the situation. What we can do is be present as you suggest and bear witness to the suffering. As above, this is not enough, but it is not a small thing.

Comment 9

Good for you... not everyone learns this in medical school (or ever!), but as you note so insightfully, this understanding is what allows you not to be so wrapped up in your own limitations but to be emotionally available to patient and family.

---

1.9.13

Comment 1

Indeed, and as she noted, loss can take many forms. I think medical school often entails loss – in terms of lost freedom, lost confidence, lost friends, lost boyfriends. Fortunately, these are the kinds of things that, we hope, can be refound.

Comment 2

Losing a 7 year relationship is a real loss. The loss of a significant relationship (not through death) can certainly trigger grief, and that grief is very similar to the permanent loss of death. Especially when there is no possibility of reclaiming that relationship, it is a kind of death, so to me it is not silly at all to compare the two

Comment 3

Sadly, this is an important lesson in life. We do lose others, through death, through change, and knowing how to let them go with strength, with grace, and eventually with some forgiveness, enables us to move forward.

Comment 4

What a good lesson to have discovered about yourself! It is natural to want to avoid loss, but when it comes to our doorstep, as it inevitably does, often we do surprise ourselves by the strength we find within.

Comment 5

Absolutely. Two losses that now are treated more seriously but historically were trivialized were early miscarriage and death of a pet. Now we are more sophisticated about acknowledging the severity of these losses, but I still hear people dismissing them as “not real” or not serious. As you recognize, they are.

Comment 6

What an interesting observation. Depending on the nature of the loss, sometimes people do quite amazing things soon after the loss, either because they want to honor the person’s memory or (perhaps unconsciously in your case) they want to show that the loss will not destroy them (and many other reasons as well – compartmentalizing is a good theory). I’m glad you passed

Comment 7

This is an excellent conclusion, especially the qualifying phrase. In my experience, sometimes life is very very hard (and I’ve probably had a pretty easy life compared to many). Difficult events can overpower us, so that they are all we see. I think this is an error (perhaps a spiritual or at least a psychological error). When we are entirely consumed by darkness, we fail to see exactly what you recognized – that small light from someone’s smile, or a beautiful sunset. So in my mind, it’s not about pretending that everything is jolly, but as you put it so well, allowing everything in, the painful and the beautiful.

---

1.15.13

Comment 1

We want to reassure, that is the impulse, but sometimes we must be strong enough to help the patient face the devastating reality. This is just what you did.

Comment 2

I wonder how you felt as you listened. Was this difficult? Did you feel better – or worse afterwards? The physician too can have many feelings in the face of a patient’s terminal diagnosis/transition to hospice/death, and these deserve attention as well.

Comment 3

Great observation. As Dr. Koons always tells us, truly being present and listening to another can be a great gift, perhaps the best we can give, and often all they need (other than a complete cure!).

Comment 4

thank you for bringing up the importance of faith in helping us mourn the loss of a loved one. Interestingly, there hasn't been a lot of mention of this in the class. I am also Jewish (although not super-observant), and can attest that even the existence of these rituals, as well as such practices as reciting the Mourner's Kaddish, provide an invaluable anchor to hang onto in the midst of grief.

---

1.5.13

Comment 1

I can hear your regret. In hindsight, our lives would be perfect. It is harder making these calls living forward; but from my own experience in similar situations, I know how hard it can be to think, "I made the wrong choice."

Comment 2

There is a lot of consolation in this knowledge. One lesson I've learned is that the passing of a loved one is not about how WE would have wanted it, but about how THEY would want it

Comment 3

I think it is easy to feel guilt around death because the circumstances are rarely "perfect," so we can always think of something that might have made it "better." Also, because we are experiencing profound loss, we sometimes cope by thinking "if only this" or "if only that," then our grief would be less. Usually that's not the case.

Comment 4

in my view, you've taken regret and guilt (emotions that we use to punish ourselves, but that produce nothing good in themselves) and transmuted them into a wonderful lesson: to appreciate loved ones ALWAYS regardless of other priorities. I am confident that your grandfather would be very proud of you.

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1.21.13

Comment 1

You know, this seems such an obvious observation, yet it strikes me as incredibly profound.

Comment 2

Me too. Despite its inevitability, death still strikes me as fundamentally "wrong." I've known too many good people who have died. I wish I were more reconciled to death, but as Edna St. Vincent Millay wrote in a wonderful poem *Dirge Without Music*, "I do not approve. And I am not resigned."

Comment 3

This is why Einstein said that science could never provide answers to questions about values.

Comment 4

It sounds as though you are saying this is a bad thing; and indeed, if the dead prevent you from savoring the present, then it might well be. But I wonder if there is a way that the dead ARE still alive within us, in our memories, in a way that is consoling and meaningful

Comment 5

This is all very well said, Ann. Someone once said to me, “You love life too much to ever be able to fully accept death.” This is probably true, and it might be similar to what you’re saying as well. But perhaps the goal is less to accept death, than to “use” death as you say – to value the preciousness of life and make the most of the lives we are given.

Comment 6

Yes, it is a harsh “fact” (yet another inconvenient fact) that intense, prolonged suffering can leech the meaning out of life so that death indeed is a desired option. This seems like yet another cruel twist of fate.

Comment 7

An interesting and well-observed distinction between acceptance of your own death and “professional” acceptance of death.

Comment 8

Very well stated. This idea of “getting out of the way of death” sadly is exactly what is needed from the medical community at a certain point. I too from my own perspective have seen too many deaths where everyone – including the physicians – could not let go, although there really was no other choice.

Comment 9

This is touching and beautiful, Ann. Darn it all, but we cannot change the reality of death. Therefore, as you express so eloquently, we must respect it, and as best as we are able, force it to mean something.

---

1.11.13

Comment 1

I wonder if this is because he has been such a strong, dominant presence in your life?

Comment 2

This is a sad, but illustrative, example of how our lives are inextricably linked. Your best friend’s father dying brought you very close to your own fears about losing YOUR father. Of course, as you know, this can happen in clinical medicine too.

Comment 3

So perceptive – you needed to be there for your friend as a friend.

Comment 4

This acknowledgment of your own humanity in the process of being the “comforter” and supporter of the bereaved person is so important. Grieving, even when people have different levels of grief, is always mutual. As you pointed out above, you were engaged in a kind of anticipatory grief for your father.

Comment 5

This is always the most important lesson death can teach us: Love the ones we love, and let them know it.

---

Comment 1

What a shocking blow. This image of your mom calling out your stepfather is heartbreaking.

Comment 2

Yes, I can see you trying to take over the strong father-figure role. What an incredible responsibility and burden.

### Comment 3

It is so easy for this to happen. It is noble and generous, and in some ways it is also easier to focus on others than on ourselves. Horrible as their pain is, it is sometimes easier to bear than looking at our own.

### Comment 4

And you might well have been right. You might have been what was holding the family together at this point. In some ways, it is very analogous to medicine, for both good and bad. Everyone relies on the physician to contain the chaos and confusion and fear of serious illness and dying. It's great that there is someone there to do this. But that physician also has to find a way to take care of herself or himself at some point. If self-care is deferred indefinitely, the physician collapses/burns out, and then everyone suffers.

### Comment 5

Of course, this is key in facing life's terrible challenges. We must pull together, and support each other - if you will, to be a team.

### Comment 6

Thank you, Thiago, for sharing this emotional journey so honestly. Your comments are very perceptive. When grief is internalized, it can lead to depression, as Dr. Raphael noted. Further, you were "out of sync" with the family. They had grieved and mourned, you were just beginning. In fact, in this respect you were alone. No wonder you felt helpless.

### Comment 7

An important insight indeed. Sometimes the strongest thing you can do is to show grief, but it lets others know who are looking to you for guidance and leadership and hope that, in fact, we can mourn, grieve, and cry, and STILL go on.

### Comment 8

Another great insight - showing vulnerability lessens the divide between the "strong ones" and the "weak ones." Being vulnerable occasionally both allows you to set down the burden of "always being strong" and to allow others to show strength

### Comment 9

When people feel safe that their grief and sorrow will be acknowledged and accepted, they can share them; by sharing them, they face them, begin to integrate them, and eventually find a proper places in their lives for these emotions.

---

1.5.13

### Comment 1

What a perfect metaphor for life – there we are inside our little glass globes, dancing so beautifully, yet with the knowledge of how easily the globe is smashed, how fragile life really is. Yet what is most powerful about this piece is not that the globe smashes, but that the fear of it smashing is so powerful. To me, this is the key insight – at some point, the globe smashes for all of us. So the only question is how do we spend the time until that moment? Dominated by fear? Or appreciating that delicacy and beauty of the globe?

Comment 2

This poem seems to ask the same question through a reexamination of the familiar nursery rhyme (which indeed is a cautionary tale). What is the balance between safety and risk? When does fear of falling excessively constrain our living? When are we assuming foolish risk? What does it mean to be whole? Can we be shattered, yet more whole than before? Wisely, you do not attempt to answer such questions, but your poem implies them vividly.

Comment 3

Here I detect a different idea. Life is change, and change often implies some loss. But at some point we must appreciate what we were given, for the time that it was given, and then be able to let go. This is how life is lived fully. This is how we move into our futures.

Comment 4

I want to take a stick to that voice in your head! It makes me so sad how many young women somehow have internalized that voice, created by superficial societal standards of value.

Comment 5

I am not at all surprised (and I bet your sister isn't either ☺), but I AM very happy for you. I'm one of those people who believes that one of the greatest blessings in life is to find a soulmate with whom you can take the journey.

Comment 6

Another wonderful idea. The older I get, the less I understand, but the more I accept. Life is strange and wonderful, but it is not perfect. Maybe that is a good thing. The Navajo insert an intentional “mistake” or imperfection in their blanket-weaving, with the idea that this provides an outlet for evil spirits to escape. Who knows? But there is widely held agreement that their works are masterpieces ☺.

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1.11.13

Comment 1

I have learned that, even when death comes as a “relief,” there is really never a good time to lose someone you love

Comment 2

We do not see what we don't wish to see. Psychiatrists call it denial, but it can also be called love.

Comment 3

What moves me so much is his embarrassment. How hard it must have been for him to be in this vulnerable position.

Comment 4

This must have been so painful – and shocking – for all of you.

Comment 5

Something that sticks with me is the idea that a good life is not erased by a bad death. Not that your grandfather had a “bad” death, but the family, and you in particular, had a painful “last image” to deal with. Yet there were also all those other wonderful images of a life well-lived (the bike, for one). You used a conscious strategies to superimpose the “good” over the “bad.” To me, this is skillful coping because, although you could not change the fact of your grandfather's death, you could choose how you wished to remember him.

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01.07.14

Comment 1

She sounds like an absolutely wonderful grandmother. How lucky she was yours.

Comment 2

This sounds like a hard situation. You, a favorite grandson, wanted her to stay. Yet her own sons (and perhaps she herself) thought she needed to return to Pakistan. Ultimately, although you might have tried harder to get her to remain in the U.S., this was going to be her decision.

Comment 3

I don't mean to jump in, as you have a much deeper and first-hand knowledge of the situation. But I wonder whether you really could have controlled the situation to such an extent. It is always easy to look back and think, I should have done this, I shouldn't have done that. But it's hard to know.

Comment 4

I'm sorry that there is this family rift. I hope that your uncles were acting in what they thought was your grandma's best interest, and not out of a more selfish motivation.

Comment 5

I am so very sorry. This must have been a devastating loss for you.

Comment 6

I know this level of sorrow is hard to bear; but your tears show how much you loved her.

Comment 7

I suspect this is what your grandma would want for you – to cherish her songs, her food, her care and the closeness you shared.

Comment 8

And perhaps this will happen in time. And perhaps not. Again, I don't mean to presume about your family, families are complicated. But hopefully you can release your anger at some point, although you may never desire close association with your uncles. These things take time. Be patient, and see how your feelings evolve.

---

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01.27.14

Comment 1

I don't believe grief ever completely vanishes, it is more that it changes in intensity and frequency. In a way, I suppose, we would never want to lose that pang of sorrow when we think of such a dear friend.

Comment 2



This makes perfect sense to me – such an event is not understandable from a perspective which says the world is a fair, just place. Unfortunately, most of us eventually learn that, although the world is many wonderful things, fair and just it often is not.

Comment 3

This is such an excellent “test,” and I know many people who use it: not “how do I feel?” (although acknowledging one’s sorrow is certainly important) but “what would my dear friend want of me moving forward?” When they ask this, most people discover that that departed person would want their life to inspire meaningful action to make the world a little better.

Comment 4

This can be hard, and I wonder if you ever feel badly celebrating a day that has been marked by death. Of course, referencing the above, if we were to ask Rod, I’m pretty sure he’d say “Celebrate away, man! And make a difference for me.”

Comment 5

Gratitude and commitment are two important lessons we can choose to take away from painful loss. Clearly, these are lessons relevant to your personal life – and to your future life as a physician: gratitude that, hard as it can be, you have the opportunity to practice this helping profession that benefits so many; and commitment to giving back to your community. I have a feeling Rod would like this.

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01.27.14

Comment 1

Thank you for sharing this heart wrenching essay with me. indeed seems like someone so full of life and potential, and I am sure his loss was tragic to all of those who were blessed enough to know him. I think in this case, coming to terms with his loss was particularly tough given how sudden, unexpected, and futile his death truly was. I think your experience in working through losing someone close and meaningful to you will infuse all of your empathic interactions with patients and families...as you will realize that each and every patient is meaningful to someone, and their loss, sudden or expected, will be equally painful to process. Thanks again for sharing your story, and I wish you all the best.

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01.05.14

Comment 1

This is a very important realization. I’m often surprised that this is not a more widely recognized side of the equation (and as you point out, that is changing). I think the imbalance historically has come from conceptualizations in medicine of death as the ultimate physician failure.

Comment 2

I am terribly sorry that his life was cut short; and that you and your family had to endure such a loss.

Comment 3

And as you have now likely experienced from the doctor side, this is how many if not most family members feel toward the physicians who have cared for their loved ones.

Comment 4

Very good insight – this is a lot to ask of grieving family members, but it is very accurate that many physicians long for this absolution. While families cannot always provide this, physicians must seek it in other ways, whether from colleagues or perhaps most importantly from within themselves. I think this is the reason some physicians attend the funerals of patients with whom they were particularly close, to encounter the family at a time of closure and hope that they will receive what they seek.

Comment 5

Very poignant and, in my experience, accurate description of grief.

Comment 6

this is such a wise statement. This sense of “standing side by side” with the suffering other I believe is the central moral imperative of medicine.

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01.06.14

Comment 1

There are a multitude of chronic conditions that we “manage” rather than cure, and then there are the life-threatening diseases that we attempt to “fix”, sometimes succeeding, but often reaching the limits of our human capacity.

In fact we only “cure” a fraction of the time.

Comment 2

You were able to feel gratitude and compassion for the doctors at a time that must have been so very painful....that takes a very generous spirit!

Comment 3

Well said. Fortunately, the development of the palliative care field has put a spotlight on the importance of helping patients and their families at the end of life.

I think that having the ability to help people at these difficult moments is a gift, and provides a different, but no less important, form of healing. We cannot always cure, but we can always care.

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01.10.14

Comment 1

Although this statement is not always possible or even appropriate, based on the way you describe the situation, this was an exceptionally humane thing for the busy ED doc to do. It was a way of beginning to prepare the family. As you go on to say, this information can be literally incomprehensible to family members. Many times I’ve heard doctors say (with some annoyance) but we told them the cancer is terminal! The brain resists what it does not want to hear.

Comment 2

Such a wise statement. Death in this sense is definitely not the end, only the beginning of many other stories, most of them very difficult, as you discovered..

Comment 3

Yes, even simply watching such scenes play out with complete strangers can be hert-wrenching. I don’t think this is a bad thing – it is our natural human empathy at work.

Comment 4

This is a balanced and fair statement. As you well know, depending on the circumstances, “acceptance” and “carrying on” can be the hardest things in the world. That they should happen is logically and intellectual indisputable – but how to get them to happen often seems pretty

impossible. It is not only a matter of will, but of heart and soul and spiritual alignment. This is where the patience and compassion of the physicians, nurses, and others who witness the loss come into play. There is no formula for finding the peace to accept and the strength to carry on, but with luck, support, and a little grace, people find their way.

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01.08.14

Comment 1

These “at-a-slant” encounters with death of course are not as devastating as the loss of someone near and dear. Nevertheless, they are important because they are how we all start forming our understanding of death.

Comment 2

I think this is one of the really hard aspects of medical school – it brings young people, many of whom have had only a glancing relationship to death, into its presence in an extremely intense and repetitive way.

Comment 3

This is one way of approaching death and dying, and has the benefit of keeping you insulated from its distressing aspects; but also insulated from some of its human aspects. It is a hard balance between connection and distance when considering dying patients, and one every clinician must work out for himself/herself.

Comment 4

Partly what I hear you saying is that you were very focused on the educational aspects of these experiences, which of course is extremely important. However, as you write, there are always present dimensions of suffering and joy – and sometimes both together that are part of the totality of the experience – and maybe the medical student’s education as well.

Comment 5

This is a wonderful observation, Alex. You recognize that it was the patient’s family, NOT the medical team, that encouraged, maybe even demanded a human connection by getting to know the team as human beings as well as doctors; and by tenaciously bringing the person of their loved one into his hospital room for the team to see and witness.

Comment 6

what a beautiful – and human – last image to hold of this wonderful family. I also hope that this experience encourages you to explore the worthwhile, albeit messy, dimension of clinical care even when patient/family are not able to initiate such a connection

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01.10.14

Comment 1

I wonder if you mean accustomed to seeing or accustomed to feeling – or both.

Comment 2

You put this exceedingly well, John. In my view, it is all about the balance. You cannot think about every patient for even 5 minutes after they disappear from your line of sight; but spending those 5 (or less) minutes acknowledging the passing of a life; or being aware of the very hard road facing a dying patient does help keep your humanity intact.

Comment 3

How terrible – what a shocking loss. And when it is someone close in age, it makes the reality of our own mortality even more palpable.

Comment 4

And of course you know that this is many people's (not just doctors') initial reaction to a significant loss

Comment 5

You know, there is really no "right" way to experience grief. People respond in so many ways – with tears and shrieks, with calm but sorrowful acceptance, with anger and rage. Many people have delayed responses where for awhile they feel "nothing." And even the same person may respond very differently to different types of loss. So I hope you don't lock yourself into a box about how to grief.

Comment 6

Again, I just want to reiterate that "numbness" is often a self-protective response because at some level we know we have been devastated and we are scared to experience this. When we do, however, we learn that grief is painful but also survivable – and healing.

Comment 7

Indeed, and your own response hopefully will make you realize that a "stoic" response does not indicate an absence of grief.

Comment 8

I am very happy for you. As the Buddhists say, a thousand joys a thousand sorrows. We must not be afraid to embrace them both.

Comment 9

None of us can fully resolve the riddle of death; all we can do is search for ways to imbue these losses with some meaning.

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01.13.14

Comment 1

Thank you for sharing this deeply personal essay with me. I am so sorry for the loss of your dear cousin Victor. However, I am glad you came away with an important lesson that it seems will serve you well in medicine, as well as life as a whole...That not only is there no one way or "normal" way to deal with loss, but also that your own experience of loss will come and go and flare and fade in unexpected ways and at unexpected times. It seems that one doesn't move from one stage of grief and loss and "graduate" to the next...but rather that we cycle between all of the stages as time moves on. Thanks again for sharing this with me, and all my best.

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01.08.14

Comment 1

Yes, many students in my experience worry about falling into one or the other of these extremes

Comment 2

I think this is a real risk. It is hard to compartmentalize the experience of emotions.

Comment 3

Haha, one of the (many) prices you pay when you become a medical student!

Comment 4

Short answer, yes. Many many doctors have written about how, confronted by the choice to remain the doctor or enter into the role of grieving daughter, wife, sister etc. it feels safer to stick with medicine.

Comment 5

Interesting. I wonder what was the source of this annoyance. Did your sister commandeer the role of “grieving family better” in a way that was hard to compete with? It is also important to remember that people grieve in different ways, and people may be authentically grief-stricken without a dramatic “display.”

Comment 6

And this is a very good point. Even when one is not a doctor, there is a time for crying and grieving, and a time for dealing with the instrumental content of the loved one’s condition. Personally, I find that, although it is hard to do, I am more effective when I can separate the two. In other words, when I grieve I try to JUST GRIEVE. When I am trying to understand treatment options or the implications of a diagnosis, I try to set aside (temporarily) my emotions, because they make it harder for me to understand the content. The danger with such compartmentalization is that you never create a space for grief, rather always finding a reason to hide in the instrumentality. The grieving is just as important.

Comment 7

And here I believe you’re saying that some of your tears were for your own frustration at still struggling with this balance. I think this is honest and perceptive. In my experience, grief is rarely pure – some of it is for the person gone, some for ourselves, and sometimes other sadnesses get triggered by a loss. I have never worried too much about this. Sadness is sadness and deserves expression.

Comment 8

You definitely want to be careful about judging yourself. As we both observed, people grieve in different ways. Some people NEVER cry, but that doesn’t mean their grief is not real. You responded very appropriately on an emotional level, as far as I can see. It is when people have no room for grief in any form that eventually problems arise.

Comment 9

Exactly. And your joy in medicine – in the clinical and scientific aspects of medicine – is a good thing. It is something that will carry you through stressful days and exhausted nights.

Comment 10

I’ve noticed in many families – again, not families with doctors – different family members often assume different roles. Some handle the money, some problem-solve the care needs, some sit at the bedside and reminisce, some carry the grief of the family by crying non-stop. (By no means all families are this “compartmentalized,” but I’ve seen it often). The main thing is that you feel you have permission to express all sides of yourself. You don’t want to feel, “I can’t cry because I’m a doctor.” But, as your cousin’s son recognized, you were extremely helpful to the family in a way only you could be. So long as this doesn’t come at your expense (“I never had a chance to grieve because I was so busy reviewing the medical chart”), you are providing a great benefit.

#### Comment 1

This of course is a very real loss, as real as a death. With all the issues your dad struggled with, it is obvious he couldn't be a father to you.

#### Comment 2

She does indeed sound like a strong, determined woman, and very dedicated to her children. From what was undoubtedly her own loss and grief, she was able to extract powerful lessons to give her daughters essential life skills

#### Comment 3

This is wonderful, Briana. As you probably know, simply having experienced hardship in one's life by no means guarantees greater compassion, tolerance, and nonjudgmentalness. It is all how we choose to respond to the difficulties that we encounter. It is a sad reality that even today mental illness and substance abuse remain stigmatized conditions. I'm sure you have seen attendings or residents roll their eyes or make disrespectful comments about patients suffering with these problems. You can honestly say, this could be my dad. You are indeed a courageous and caring to allow this reality to move you closer to patients, to recognize there but for the grace of God go all of us.

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01.18.14

#### Comment 1

He sounds like a wonderful dog, and a great member of your family.

#### Comment 2

Yes, I can see that it would. It is really important, whenever possible, to have the chance to say goodbye – whether to pets or to people. In this case, your mom was clearly trying to minimize Bruno's suffering, but you lost the chance to have a final hug and say thank you. This is something to remember when family members tearfully plead not to take their loved one off life support until a distant family member arrives

#### Comment 3

of course you know this, but the loss of a pet can be just as devastating as the loss of any other family member. As a physician, you may well encounter patients who have lost a pet going through the stages of loss and grief. We should take these losses just as seriously as though it were a loved one (and indeed it was).

#### Comment 4

Yes, this is very well said. We can never fully understand another person's experience, but the more we try to connect with them, the more we will be able to support them.

Comment 5

This too is so wise. It is easy for the doctor to think, I am the expert. What does the patient/family member know? But they too, of course, have knowledge – a different kind of knowledge based on their life experience. And as you say, it is well worth attending to.

Comment 6

I very much respect this conclusion. When life wounds us, it is easy to be bitter or self-pitying. It is harder to turn these blows toward something good, but it can be done. And then hopefully the world becomes just a tinny bit better place.

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1.9.14

Comment 1

What an incredible life story. She sounds like a remarkable woman. To have her glass-ceiling-smashing attitude, her sense of adventure, and her generosity as part of your legacy is a great gift.

Comment 2

Yes, it is something we often take for granted, until it is no longer there.

Comment 3

This account is so evocative of how a serious illness in a family brings out instabilities and conflicts that heretofore have been successfully submerged or ignored. The level of stress for everyone suddenly rises astronomically.

Comment 4

Yes, from everything seeming right and natural, everything suddenly becomes wrong and off-kilter. It doesn't help at all to know that this is more or less how a serious or terminal illness reverberates in most families and relationships.

Comment 5

this is so hard to read. I feel badly that you were going through this, and I was completely ignorant. I wish I could have helped you in some way, although nothing could have solved the dislocation and topsy-turvy turn your life had taken.

Comment 6

You know, I'm struck that immediately after describing how incredibly difficult – really horrendous – in some ways this year was for you, you are able to say it was a great honor. You are right. You were tested in ways that few people are tested at such a young age (although eventually we are ALL OF

US tested in some variant of this experience). How you behave and what you learn is what gives you your foundation to go forward.

Comment 7

Possibly you could some have been better, who knows. Possibly you could have been “perfect” – getting 100% on all exams, never sleeping, being gracious and supportive to your friends and your mom every second, running and winning a marathon or two – but I doubt it. I know for sure you could have handled this much worse. In terms of editing a bit the story you are telling, at least make some space to admire how you hung in, not for a day or a week but for a year, how you survived your grandmother’s loss and your identity being shaken to the core, and how you kept going. There is so much to admire in that persistence and courage. I suspect your grandmother would see a great deal of herself in you.

Comment 8

It is easy to see how you might have felt this way – you are hypercritical of yourself and perhaps slightly idealizing of her. She was clearly a woman of great strength, intelligence, and kindness – and yet I suspect if you had asked her, she would have recounted similar feelings of inadequacy and failure. I suspect, although of course I did not know your grandma, based only on what you’ve written, that you were very much your grandmother’s daughter in this overwhelming situation.

Comment 9

Oh, I am very glad to hear this. It is exactly what I was thinking. Without blinding ourselves to reality, or our own shortcomings, we can tell stories that balance the flaws with the strengths; that are compassionate toward ourselves and others; and that, without being self-glorifying, make us happy to be alive.

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1.13.14

Comment 1

your grandmother sounds absolutely amazing. What a role model to have as a young girl.

Comment 2

How difficult to focus with having this all happening at home.

Comment 3

It must have been very challenging to suddenly have your security replaced by so much chaos and uncertainty. As you clearly know, one does not heal from such trauma overnight, although the world around us continues to move at speed, expecting us to keep up....

Comment 4



Fortunate that you could be close by....

Comment 5

That is fascinating, and looking at the blog link that you had sent, it apparently works .

In some way, the repetition of your story did help you to heal from this loss of your grandmother, and this feeling of losing part of your identity...

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1.14.14

Comment 1

That is very generous and loving!

Comment 2

Distance and infrequent contact do change the nature of the relationship, don't they?

My family lives thousands of miles away, but after being separated for so many years (although we try and meet yearly) there is something very different about the relationship. Although we love each other, we do not share the day to day events and concerns in the same way....perhaps this is part of it for you too?

Comment 3

Good that this assignment helped create this awareness for you. When you realize how much it means to you, you can modify the course you are taking.

Even outside of AOD, the act of journaling or writing, does seem to help create awareness. We have an opportunity to look at the events again, and sometimes we see the same event with fresh eyes.

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1.13.14

Comment 1

People are very different about friendships, but for me the pattern you describe is very recognizable. I've concluded that many relationships are like flowers – they bloom and fade. Due to changing phases of life, different kinds of personal growth, people who were once good friends are not so any longer. It does not invalidate the meaningfulness of those relationships when they existed in the full beauty; but only like all things they are impermanent and pass. I also agree there are a few relationships that endure over a lifetime

Comment 2

And it may be that because of the different paths your lives have taken, you have lost none of the love but perhaps some of the points of connection that you once shared.

Comment 3

It is much to your credit that instead of withdrawing from your brother, you choose to cherish your time together. You may also decide that there are ways of getting “reacquainted” at this stage of your lives and deepening your relationship. You can’t make this effort with every “past” relationship (indeed it would not make sense), but as they say, family is forever.

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1.20.14

Comment 1

being involved in helping family members as a doctor/medical student is so challenging. It sounds like your aunt fought this disease with all her might, and that you and your family did whatever was possible to fight this terminal condition. I suppose one can never know the answer to these questions for sure.

Comment 2

You had lost a close relative, and had been involved in both a personal and professional capacity in your aunt’s care. How difficult to just “march on” and not be able to share your grief.

This idea about judgment is so true. I think we have a lot of ambivalence about our expectations from physicians. On the one hand we want them to be compassionate and caring, but on the other hand, in no need of care themselves.

Is this a realistic approach? Or are we also allowed to feel and be human, and to look after our own emotional needs?

In so doing, perhaps we can form warmer and more effective relationships with our patients.

Comment 3

Such a experience as you have had with the illness of your aunt must have made you very aware of the need to be present for the patient and his family.

Comment 4

Your own painful experience seems to have given you the ability to face the suffering of your patients more directly. I am sure they will be grateful to have a physician with that type of courage and commitment.

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1.17.14

Comment 1

As always, you know how to capture the reader's attention, how to involve us, and then how to show us the context.

Comment 2

I am wondering - do you think it helped that there are so many doctors in the family? Did it result in your aunt's receiving better care? Did your - and their - knowledge help explain the situation to other family members?

Comment 3

It is so powerful to hear you repeating this sentence, as this is the question that reverberates in the heads of many family members - and I hope physicians as well! - about difficult care choice points.

Comment 4

I understand from this that the "inner circle" of family member- doctors had a different understanding of what was happening than did the non-doctor family members. It is such a fine line to walk - not destroying hope, but helping others to see clearly.

Comment 5

Thank goodness it did. Sometimes it never changes, up until the end. I admire both of your courage in tackling the difficult but necessary end of life talk.

Comment 6

It is heartbreaking - and infuriating - that when people are facing their own mortality, when they are suffering and in pain, insurance issues can become paramount. I have one word for that: single-payer.

Comment 7

I am always hesitant to talk about good deaths, since that phrase can seem to trivialize what is rarely a simple process, but it does sound as though your aunt experienced "a good death." I am also glad that she was able to say goodbye to you.

Comment 8

I always find this so sad. Students almost always make the same choice, because despite rhetoric to the contrary, the system expects and rewards that toughness. It is much more convenient for everybody if you just "march on" in your great phrase.

Comment 9

Again, it is distressing how much "judgment" and lack of compassion exists in medicine, of all professions! It seems so sad - but not at all surprising - that the place you felt safe enough to give

way to your emotions was in your car! I am very glad, however, that you had the wisdom to turn to mentors who could support you. At times like these, we need others' strength as well as our own.

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1.7.14

Comment 1

Based on what you say here, it does not seem to me by any means that you “overstepped boundaries.” It sounds as though you included them in an appropriate way, just updating them on what was going on.

Comment 2

Interesting. I’ve heard experienced physicians talk about this – the difference between “sick” and “inpatient sick” – when a patient is really on the verge. I think it is something that comes with experience.

Comment 3

I know this happens all the time, but as a nonphysician it seems to me like a terrible way to learn that a patient has passed away.

Comment 4

It does sound that way. This was NOT your fault, of course, but it makes you wonder if anyone else was thinking about this patient as hard as you were.

Comment 5

To me, this seems like a terrible failure. If you happened to listen to Dr. Goldman’s TED talk about doctors making mistakes, one of his biggest criticisms is the culture of silence surrounding medical mistakes – or even misjudgment or even unavoidable failures. Without honest talk, there can be no learning.

Comment 6

It is extremely painful to make such an admission, and I admire your courage in doing so. Although you were the fourth year student, and had the least responsibility (and actually seemed to care the most), I don’t think you can be part of a medical team in these circumstances without feeling some degree of complicity in their shortcomings. It seems to me you tried hard on behalf of this patient, but had very little power. In the absence of your TEAM sitting down and figuring

out what they could learn, you have to be your own team and think about what you will do in a similar confusing situation with ambiguous medical issues and lines of responsibility.

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1.20.14

Comment 1

this is a very real loss, and I'm glad you chose to write about it. The loss of friends, the loss of familiar surroundings that you've grown to love, can, as you put it well, leave you feeling empty and disoriented.

Comment 2

Yes, many people experience after having lived in a different culture for a long time. In "re-integrating" to your "old" culture in a sense you are "giving up" the new culture to which you'd come attached. In one sense, there is a parallel between the person who has lost a loved one, and feels "disloyal" when they begin a new relationship.

Comment 3

When I was first married, I spent a year and a half in Asia with my husband. We experienced a similar paralysis when we returned to LA, confronting supermarkets, freeways etc. We felt an inability to function in this world.

Comment 4

This is also an insightful observation. Immersed in a very different culture, you change. When you return to your old culture, you are no longer the same person, and it is impossible to "pick up" relationships where you had left off.

Comment 5

Again, very insightful. There was double loss for you in this experience. I think you've done an excellent job of recognizing just how unsettling such large cultural and relational upheavals can be – even if self-chosen. I hope that in the intervening time, you have re-adapted to life in the U.S. while bringing along with you the growth you experienced in Namibia.

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1.21.14

Comment 1

cannot begin to imagine how it must have felt to leave such a different world, and the friends you made, to return to the US, in particular this little girl!

Comment 2

Travelling outside of the country really opens one's eyes to a very different reality, doesn't it? I would be very interested to know more about your experiences in Namibia.

Were you surprised by your own reactions on returning home?

Have you considered what could be done to reduce your feeling of alienation?

Comment 3

Yes, indeed.

At some point, if you decide to write some more about your experiences, it might be helpful to understand in more detail what caused you to feel this way, and ways you have found to help you cope with these losses.

Thank you for sharing your story ☺

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1.9.14

Comment 1

Of course, such kindness in no way mitigates your sister's loss, but it does restore faith in humanity that in such devastating circumstances, so many people step forward with love and caring.

Comment 2

This is an excruciating way to learn this lesson (and simply losing a loved one does not necessarily result in such empathy), but knowing this will make you a better doctor and a better person. It is hard to understand the pain of such loss until it becomes YOUR loss. But you can never look at another mourner without remember your sister and your pain when she died. You also learned that the love and support of other people – and this includes the physician – can help make the unbearable bearable.

Comment 3

This is a very moving aspiration, Jeff. There is no rhyme or reason in Katie's death – but by committing to serve future patients and families with greater compassion and sensitivity to wrest

some meaning from her loss. I believe this is all we can do as human beings, but I believe this matters.

Comment 4

am terribly, terribly sorry to learn of your sister's death in this tragic manner.

Comment 5

Such a wise statement. There is no way to anticipate or prepare for a loss of this magnitude.

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1.18.14

Comment 1

This is such a painful experience and one, for better or for worse, that is increasingly common. We find it in families of patients with Alzheimers disease; or with other conditions that inexorably leech away the personhood of the patient while they are still alive

Comment 2

You are asking a very difficult, but absolutely necessary, question. The only person who can answer it is the individual herself or himself (and even then it is incredibly hard!). An advanced directive of course can spare some of the anguish of living-but-not-living that your grandma may have endured.

Comment 3

I think it is very hard for a child to make any other decision for a parent in the absence of very clear evidence to the contrary. How can you be the child to say, "Let mom go"?

Comment 4

Yes, that is very understandable, but it is with the benefit of hindsight, having lived through those terrible two years. At the front end, it is an awfully tough choice. That's why an advanced directive can take some of the burden from family members

Comment 5

Having seen your family live through this experience, I suspect you will have the courage to help patients and families discuss the issue openly and honestly. You make a very good decision – merely existing vs. death with dignity. Framed in this way, I think many people would choose the latter.

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1.10.14

Comment 1

Yes, exactly how someone would feel if a doctor had consistently dismissed their family's concerns about a loved one's decline.

Comment 2

This is heartbreaking, Luanna. We must be advocates for our pets, and help keep them safe in the human world they inhabit. When we are not able to protect them, it is similar, in some ways, to how a parent feels about a vulnerable and defenseless child.

Comment 3

This is so well said. Professionals tend to dismiss gut feelings of patients and family members because they are not "trained." But as you discovered in yourself, gut instincts can be important – they may not be precisely right, but they are bringing something to our awareness that deserves further thought and consideration.

Comment 4

Exactly. It is compassion for suffering, physical, emotional, and spiritual, that leads the good doctor to think for just a few more minutes about the patient's plight. These few minutes can sometimes make a world of difference.

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1.20.14

Comment 1

You are right to be angry. As a non-physician, I have never understood why medical education has to be so demanding and debilitating. Is this really the best way to teach our future doctors?!

Comment 2

This is what everyone who's studied burn-out concludes. Physicians who are burned out provide WORSE care to their patients and this is well-documented.

Comment 3

Great comment, I love this. It is a good summary of what happens to doctors – they are transformed from healers into desperate people struggling to survive. How can this not be wrong?

Comment 4



To me, it is very understandable. This is what happens when the interests of the physician and the interests of the patient have become diametrically opposed. This is not an individual failing, but a systemic one.

Comment 5

The heart beats to itself first. You will be the best possible doctor you can be when you care for yourself – body, mind, emotions, and spirit. It seems impossible to think it could be otherwise. I hope you can find a residency that really honors this balance, rather than merely pays it lip-service.

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1.14.14

Comment 1

Yes, a loss like this can be sad or painful, but it fits in better with our expectations of a long life well-lived; and the memories left can indeed be consoling.

Comment 2

That is the shocking thing about loss. Sometimes loss is gradual and expected, but sometimes it comes like a bolt out of the blue.

Comment 3

I'm grateful that you chose to write about your dad's loss for this assignment. I hear how very difficult this must have been for you. Thank you.

Comment 4

this increase in empathy and understanding, this sense of gratitude is a CHOICE you have made. Many people would not have responded in this way to the loss of someone they loved so dearly.

Comment 5

I agree with this so deeply. In facing my own losses, I tend to wallow in my misery. But when I ask, what would that loved one want me to be doing right now? Crying? Feeling sorry for myself? The answer is usually no. The concept of honoring the memory of the loved one for me is very powerful and helps me wrest some meaning out of an incomprehensible situation.

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1.15.14

#### Comment 1

Of course it did – it is this sort of “countertransference” that is often in operation in a clinical encounter. It is not a bad or a good thing, but can have bad or (as in this case in my view) positive consequences, depending on how we work with it.

#### Comment 2

I have read theorizing suggesting that people become doctors because unconsciously they feel this somehow protects them from illness and death. Were that it were true!

#### Comment 3

What a wonderful comment, I love it. The idea of choosing how we channel “energy and emotion” is so true. We always have a choice. There is a great native American story in which a little girl asks her grandmother, how do you become good? The grandmother answers, “Each of us has two wolves inside us – a good wolf and a bad wolf. It all depends on which wolf you feed.” ☺

#### Comment 5

This is an incredible description. It breaks my heart, but it brings me into your experience in a profound way.

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#### 1.4.14

#### Comment 1

Well, that might make writing this assignment a little more challenging, but I’m very glad this is true for you.

#### Comment 2

Wow, I think this is so wonderful I’ve read both of these books, and I can’t think of better ways of moving closer to the loss and grief of others. I’m so impressed and touch that you would bother to do something like this to help you

#### Comment 3

Yes, this is true. However, by actually THINKING about our emotions as well as feeling them – not as a way to detach from our feelings, but to understand them better and learn from them –

they can become less confusing and better integrated into our lives – at least this is what I have found.

#### Comment 4

These reflections show a lot of insight into how your brother's decision affected you, how it forced you in a way to grow as an independent person, and how you learned to integrate this into your ongoing relationship.

#### Comment 5

I'm sure you are correct in saying that your brother's loss was much more difficult than your own. To me, this implies that he merited the majority of your attention, focus, support, and love. However, in my mind it is a situation analogous to patient care. The patient is at the center – always. But unless we learn how to process, understand, and release our own feelings, however “trivial” they may seem by comparison to what the patient/family are going through, eventually they catch up to you. In this case, perhaps by taking a few minutes to process how your brother's situation affected you, you were able to achieve even greater clarity on who you are now, who he is, and how the two of you connect. In any case, I hope so.

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#### Comment 1

Thank you Sam for sharing this deeply personal essay, and I wanted to provide you with some feedback. I value the courage it must have taken to reflect back on this particular experience of loss, and openly share it with us. What I take away from your essay is that you are someone who thinks critically and meaningfully about your thoughts and feelings, and then perhaps questions whether those reactions are "normal" or "okay", or consistent with how the people around you react to similar situations. This ability to introspect will serve you well in medicine. Perhaps it is important to remember that there is a whole range of "normal", especially when it comes to reactions to loss, and especially when that loss occurs when you are a teenager. Your memories of very specific details (like the towel), the intimate aspects of your relationship with your coach, even your forgetting about his loss as an important one to you...all of that can happen when we are confronted with death. Beyond that, we all at times question whether we are responding as we "should" be to loss...only to come back to the point that there is no normal. Nor can we or should we "force" ourselves to feel something that we don't inherently feel. The main thing that is important in dealing with grief and loss in medicine is continuing to cultivate insight and awareness of our feelings so that we don't develop "blind spots" that can prevent us from learning from important mistakes, etc, and modifying our behaviors in important ways for the future. Thanks again for sharing this

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12.19.13

Comment 1

I agree, that loss of a first love can be crushing. We are going through so much in high school anyway, this is a particularly hard time to experience this kind of ending.

Comment 2

Such a wise insight. You are so right. There are some questions that have answers in life; and others where we can make ourselves crazy asking over and over; but we won't get anywhere.

Buddhists call these "questions that tend not toward edification."

Comment 3

This inability to "make sense of" the event is characteristic of loss. Even when there is a logical, causal explanation – she died because she had stage IV metastatic cancer – this does not mean it "makes sense." That is why so often explanations to "show" why the death or loss was inevitable fall on deaf ears.

Comment 4

This is very similar to the "anger" of the stages of loss and grief. Understandably, we want someone to blame. When someone is responsible, it helps us to "make sense" of it.

Comment 5

I tend to agree with you. When you are suffering, you feel all alone. But when you begin to talk to other people, you discover that their lives have been filled with both sorrows and joys, they have struggled too, they have gained and lost, just like you. It helps us accept, I believe, that we are not being singled out – it is just the nature of life.

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1.9.14

Comment 1

That is a lot of loss to deal with. I've noticed sometimes losses come in waves, and others have commented similarly to me. It seems overwhelming – and then somehow we survive

Comment 2

I find this very true as well. For better or worse, there doesn't seem to be "one way" to respond to loss. It depends so much on your relationship with the person who's died, where you are in your own life etc.

Comment 3

This is indeed shocking, especially in someone so young. Especially in this modern era, there is something “out of the natural order” when we lose someone at such a tender age

Comment 4

I’m imagining how hard it must have been for you to have been going back and forth while still dealing with all the demands of 3rd year. Yet I suspect you will look back with gratitude that you were able to see her these final times. Sometimes the right thing is not the easy thing.

Comment 5

It is true both that she was NOT your patient; and that she WAS your friend. But this oversimplifies the situation. Once on the path to doctorhood, it is impossible to completely ignore this doctor part of you. Sometimes in fact, that doctor side can be very helpful in guiding family through the medical process.. In my view, the main thing is not to have Staci-the-doctor overtake Staci-the-friend; not to HIDE behind doctor-knowledge and doctor-language, but to be authentically human. This is usually a lot harder, but ultimately what the dying person needs and what you do too.

Comment 6

These are such understandable thoughts and guilts. They are related to the core guilt – she is dead and you are not. She died, you survive. There is no rhyme or reason, it does not make sense. We look for things we could have done differently. But no matter what you did or didn’t do, you could not change this outcome. This is so painful to realize, but it is in the nature of life.

Comment 7

Wow. What an amazing statement. I wonder what she meant exactly. Did she mean you would save her life? Maybe. But she could have said this. I wonder could she also simply have meant, “Staci is someone we can count on. You don’t have to worry, Mom, you can lean on Staci.” Maybe she meant this as a doctor. But I’m pretty sure she also and most importantly meant it as her friend.

Comment 8

This is a terrible feeling. But ask yourself, if she had lived, would you feel you’d let her down? Again, we like to feel there was something in our control that would change things. But no matter what you did, Gen would have died, and you would feel terrible. That is because you loved her – and still love her. You failed no one. As I said, you made a pretty heroic effort to be there despite I’m sure many competing demands. You stood by your friend, and I think that’s at

least in part what she meant when she said, hours away from dying, “She’ll take care of me.”  
You did..

Comment 9

Yes, this was an exceptionally painful way to learn these lessons, but seeing through the patient’s/family’s eyes is so important. What is straightforward and routine from the medical team’s perspective is often bewildering, terrifying, or unspeakably callous from the family’s perspective.

Comment 10

I am always surprised by how many medical students don’t realize this. Medicine IS limited, and if you yourself live long enough, 100% of your patients will die! But that is not a nihilistic view. Death is not the enemy. As a physician, you have the opportunity to reduce pain and suffering, restore people to meaningful quality of life, enhance wellbeing of so many. I’d say this is a pretty darn good way to spend a life

Comment 11

And this is yet another lesson. As precious as Gen was to you, each patient (God willing) is as precious to someone in the world. This as you recognize is so worth remembering.

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2.3.14

Comment 1

I understand the reasons why this “discovery of death by EMR” happens, but it seems shocking and wrong. At the least, it seems as though the last team caring for the patient should receive a more personal communication.

Comment 2

it occurs to me that perhaps, no matter who the patient, we never really know whether they take in what we are saying, grasp the points we are trying to make etc. It matters that you did your best to connect with this little boy, regardless of how he was able to respond.

Comment 3

It does sound to me as though everyone was working on a different level – the team on the medical level, dad on the avoidance level, mom on the prayer level. Each of these levels is

understandable, and valuable at times, but it is important to get everyone in sync as much as possible.

Comment 4

This makes a lot of sense to me. Death is sometimes not the worst alternative, especially when there is significant suffering involved and virtually no chance – barring that miracle – of recovery.

Comment 5

Interesting. I know there is a tendency – and quite possibly it is a good one – to fight “harder” for kids. But it does seem to me that, perhaps, toward the end, the team’s faith in science and the mom’s faith in prayer were equally long shots at saving this little kid’s life.

Comment 6

Perhaps you felt this just a bit as well, with all those small, obscure studies guiding a treatment plan. It wasn’t experimentation, but it might have been close to desperation.

Comment 7

Clearly, medicine did everything possible for this kid. I do wonder whether there was ever a discussion of treatment futility; or whether the team sincerely believed that there was a chance that these interventions could turn around the situation.

Comment 8

You are quite right that the family may have been so lost in their own grief that they were not thinking about the possible grief and loss of anyone on the team. I also think, regrettably, that this has become increasingly non-normative, so that families may not think it appropriate or possible. Which is really too bad.

Comment 9

Perhaps you can keep an open, don’t know mind on this point. I am often struck by how casual words spoken by a physician or medical student linger in patients’/family members’ minds. Perhaps mom forgot you entirely. Perhaps you offered her kindness at a time when her son’s life was approaching its end, and she will remember that with gratefulness.

Comment 10

This is a very wise statement, Stephanie. Your griefs were both very different, but also similar in that they represented mourning for EG’s loss. That you shared in her grief, although at a very different level, is what makes a competent doctor a beloved doctor.

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1.6.14

Comment 1

each one of these is a terrible blow. Together, they are overwhelming. It is too much to bear. I wonder if you felt like Job.

Comment 2

This is such a sad statement, but it is true. The Buddha said (very rough paraphrase!): “Suffering and joy, fortune and misfortune, pain and pleasure, fame and obscurity, wealth and poverty... did you think these things would not happen to you?” Most of us think bad things happen to other people, but life teaches us they happen to all of us (as well as many good things!)

Comment 3

This is very well said, and in my experience very true.

Comment 4

This is a beautiful poem, Teo. Thank you for sharing, I find consolation in it as well. It also reminds us that, although we are overwhelmed by grief and suffering, we eventually do have a choice about how to respond to loss. Sometimes people think perpetual grief is a way of honoring their lost one. Sometimes they experience survivor’s guilt – why are they still here and the one they loved is gone? But, as the poem suggests, it is a good question to ask, “What would that loved one want me to be doing?” and “How does my grieving serve their memory?” I am not saying grief – especially shared grief, with family and friends – is pointless, because it needs to be experienced and given voice. But grief is merely the beginning of healing (never forgetting), not an end in itself.

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1.16.14

Comment 1

his must be very difficult. Clearly, the loss of this relationship has a much wider effect than one might think about initially. I hope that with time, you will be able to remember the good memories again.

Comment 2



The separation of your parents changed the way you see yourself and them, and made you see a new role that you weren't quite ready to take on.....

Comment 3

As the elder daughter, you seem to have automatically assumed this role. It sounds like you are feeling quite a heavy burden.

Being a mediator between one's parents is a difficult load to have to assume on your own. Do they have other adults that they can talk to about their frustrations in addition to you? Their siblings, or friends, perhaps?

Comment 4

your concern for caregivers is absolutely justified. There are countless people, who have made such personal sacrifice to care for their loved ones...it is truly humbling. They can be under a lot of pressure, and neglect to look after themselves, but are often overlooked, because everyone focuses on the patient.

Being sensitive to this as a physician is so valuable... ☺

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1.10.14

Comment 1

This is definitely a very real loss. Although it is not medically related, it is worth remembering that serious illness almost always requires a reconfiguring of established relationships, and this can be very difficult indeed

Comment 2

Thank you for sharing this insight. Very true. In response to a life-changing event, we often want to keep everything in control, as normal as possible, and it takes awhile to acknowledge just how profoundly we've been affected.

Comment 3

Not necessarily. As you wisely note above, the meaning of those memories has changed – they have now been overlaid with awareness of the present “rift” and that colors your understanding of the past (not, by the way invalidates it, only alters it).

Comment 5

And as I'm sure you realize, this dynamic of the "parental child" is common in many situations, for example when drug and alcohol abuse is present in a family; or when a parent becomes very ill, and a child is forced to assume a major caretaking role. Again, it is the dislocation in what is known that causes so much distress.

Comment 6

I feel very sorry as I read this, but unfortunately I think you are right. Your phrase "have your sense of "family" abruptly redefined" is wonderfully descriptive. That is exactly what has happened, and it leaves a void – not thankfully in all ways a permanent one, but one acutely felt.

Comment 7

This makes perfect sense to me – your parents have abandoned you in some respects because they are dealing so much with their own problems and challenges resulting from the separation.

Comment 8

Of course I do not mean to jump into your family dynamics, but I do want to point out that this phase is all about defining new roles – for everybody. As things evolve, you may need to think through which responsibilities you want and feel it is appropriate for you to assume vis-à-vis your parents. The separation was their choice, and they, not you, are responsible for how this choice reverberates in their lives. It is not your responsibility to make their new lives work. I do not intend to say this in a mean or callous way. It is wonderful that you are helping you mother, your father, your sister navigate their new lives – but the heart beats to itself first. Your first responsibility is to recognize that you too have a new life, and figure out how to make it work in the best way possible.-

Comment 9

Such a wise statement. Not that this in any way compensate for the pain of becoming the child of divorce, but often such adult children are particularly committed to creating a stable family environment in their own nuclear families.

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